Welfare Reform Research Initiative

Social and Economic Causes of Long-term AFDC Recipiency

A Profile of Oklahoma's AFDC Recipients Who Have Been Receiving Aid for Ten Years or Longer

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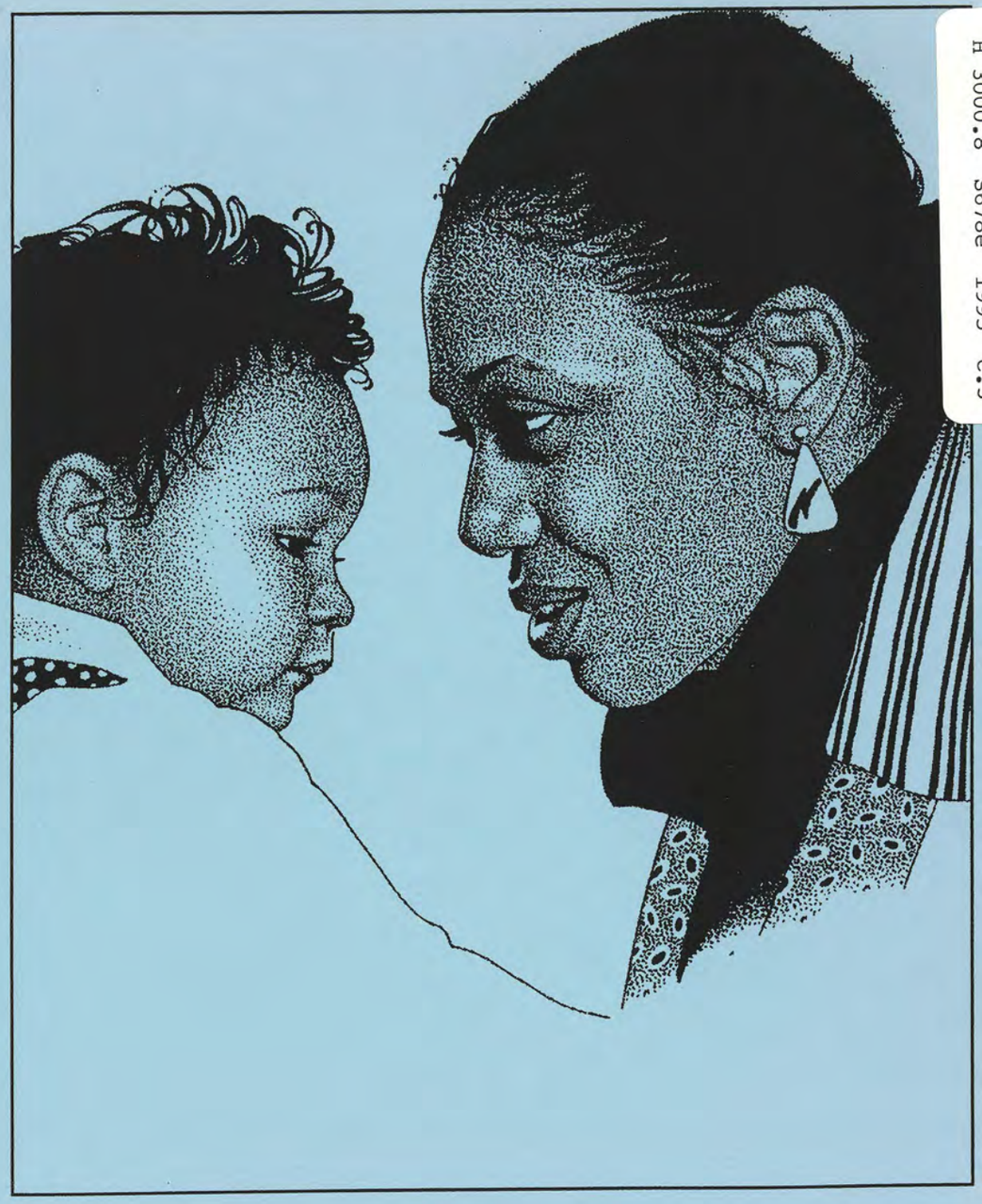

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EXECUTIVE SUMMARY

FACT:

Recipients who have been receiving AFDC benefits for ten or more continuous years comprise 2.4% (1,118 cases) of the total number of active AFDC cases (46,250; June, 1994).

In 1993, Oklahoma's Department of Human Services Welfare Reform Task Force recommended research to identify the social and economic causes of long-term Aid to Families with Dependent Children (AFDC) dependence. This study is a preliminary step in meeting the Task Force's recommendation. A mail-out survey was sent to all AFDC payees who had been receiving AFDC continuously for ten years or longer (1,118) in the state of Oklahoma as of June 1, 1994. Completed surveys were returned by 440 of the selected participants. (Eight cases were removed from the original sample of 1,118 because their cases were closed, the recipient had passed away or had moved without a forwarding address.) This represents a response rate of 39.6% which is considered good for mail-out surveys. It was determined that there was not a statistically significant difference between survey respondents and the total population of AFDC recipients who have received benefits for ten years or longer based on an analysis of Age, Race/Ethnicity, and Gender distributions between the two groups with the exception of white respondents. A larger percentage of surveys were returned by white respondents (41.3%) than was required for representation of the white recipient population (34.2% of total population). This did not affect the distribution of other racial and/or ethnic groups. Therefore, the results of this survey can be considered representative of the long-term AFDC recipient population in general.

This document presents an overall profile of Oklahoma's long-term AFDC recipient population. However, there appear to be different groups emerging from the analysis – those with permanent disabilities, those with a history of child physical and sexual abuse, and general recipients. (Indicators of emotional abuse and neglect were not included in this study.) Future reports will investigate possible significant differences between these groups. A detailed report of the survey findings follows the executive summary. This report is divided into five sections – Demographic Profile, Work History, Fertility and Public Assistance History, General Mental Health (including alcohol and drug usage), and Recipient Reform Recommendations.

✓ Recipients who have been receiving AFDC benefits for ten or more continuous years comprised 2.4% (1,118 cases) of the total number of active AFDC cases (46,250; June, 1994). Of those 1,118 cases, 58% (650) had payees' needs included in the grant and the needs of the remaining 468 (42%) payees were not included in the grant.

FACT:

Current employment interests for most of the respondents include service-related jobs and clerical/secretarial employment. It is important to note that the majority of respondents are interested in the type of employment that more than likely would not provide enough income and/or benefits to successfully end dependence on public assistance.

- ✓ The majority of payees whose needs are not included in the grant include Caretaker/relatives (17.3%; 193); individuals receiving Aid to the Aged, Blind, or Disabled (15.3%; 171); and individuals receiving Supplemental Security Income benefits (without ABD supplement: 5.7%; 64).
- ✓ The typical long-term AFDC payee is a single/never married African American female between the ages of 30 - 49 with a 9th - 12th grade education. However, there is a difference in the profile of long-term payees by grant inclusion status.
- ✓ Payees whose needs are included in the grant are more often single/never married African American females between the ages of 30 - 39 with 1 - 2 children and a 9th - 12th grade education. Payees whose needs are not included in the grant are more often separated/divorced White or African American females between the ages of 30 - 49 with one child.
- ✓ The average number of years long-term payees have remained on AFDC is 13.9 and ranged from 10 - 42 years. The most common amount of time payees have remained on aid is ten years. Over 75 percent of long-term payees have been on AFDC assistance for 10 -15 years.
- ✓ The major reasons given for leaving the workforce include health-related problems (28.2%; 75); personal problems (13.2%; 35); layoffs (12.0%; 32); low pay (7.1%; 19); temporary employment (7.1%; 19); and closed businesses (7.1%; 19) (see Table 17a-b).
- ✓ Four major groups of barriers to obtaining employment were identified by survey participants – internal barriers (transportation, education & training, work-related experience), basic need barriers (loss of medical cards, current illness, loss of public assistance checks), external barriers (inability to find work they are qualified for and/or any employment at all), and the inability to work (permanent disability). All of these barriers are statistically inter-related which suggest that solutions need to be implemented simultaneously in order to effect a significant reduction in dependence.

FACT:

Only 25.6% of the respondents believe it is possible if not highly likely that their children will receive AFDC checks as adults.
...These findings suggest that between 20 and 30 percent of long-term AFDC recipient children are at risk for developing intergenerational dependence.

- ✓ Current employment interests for most of the respondents include service-related jobs and clerical/secretarial employment. It is important to note that the majority of respondents are interested in the type of employment that more than likely would not provide enough income and/or benefits to successfully end dependence on public assistance.

- ✓ On average, long-term recipients were 19 years of age when they gave birth to their first child. The majority (74.6%) gave birth to their first child between the ages of 16 and 21. The average age at which long-term recipients received their first AFDC check was 25.65 years with 62.5% of the respondents receiving their first check between the ages of 18 and 26.

- ✓ The average number of children living in long-term recipient households is 2.68 children. The average number of children living in long-term recipient households who are the payee's own children is 2.17. An average of 2.25 children per household are receiving AFDC/SSI benefits. An estimated 102 respondents are caring for 199 (est.) children who are not their own. These findings are comparable to the demographic trends observed in the total long-term AFDC population.

- ✓ Over 95 percent of long-term recipients have children between the ages of 11 and 15 followed by children between the ages of six and ten (49.8%).

- ✓ Only 25.6% of the respondents believe it is possible if not highly likely that their children will receive AFDC checks as adults. Further 19.2% indicate that some of their adult children have received their own AFDC checks in the past and 14.1% indicate they have adult children currently receiving AFDC benefits. These findings suggest that between 20 and 30 percent of long-term AFDC recipient children are at risk for developing intergenerational dependence.

- ✓ The top two reasons given by long-term recipients for going on AFDC were "pregnancy or care of a newborn" (57.5%) and "unable to find work" (51.7%) followed by "separation/divorce" (41.7%), "illness" (39.1%), "personal problems" (37.9%), "permanent disability" (36.9%), "child care expenses" (36.8%), "low wages" (36.1%), "problems with child support" (31.4%), "family illness" (29.3%) and "loss of job" (28.3%).

FACT:

Fifty-three (15.1%) respondents indicated that they were physically abused at the very severe level (using the violence severity index) as children by their parents (see Table 27).

- ✓ Respondents indicated they would still need day care assistance for an average of four to eight months after their AFDC case was closed due to employment. Overwhelmingly, respondents felt they would need their AFDC medical benefits to continue for 19 months after their AFDC case closed. Overall, respondents felt they would need to continue to receive their full AFDC money payment for an average of nine to twelve months once their case was closed due to employment.

- ✓ The majority of long-term recipients believe they will be off AFDC in five years. Almost one-half of the respondents feel that within the next five years they will have found a job, own a car, and/or be attending school or a training program. The age distribution of the respondents' children indicates that within five years many of them will be off AFDC due to loss of eligibility.

- ✓ When asked to rank specific types of services and possible outside sources as to their level of usefulness, respondents did not rank any of the services as "most useful." They ranked seven services as being simply "useful" job training; assistance in finding a job; more education; better transportation; health insurance; assistance in getting child support; and more affordable housing. This finding may be due to a significant portion of the population reporting they are unable to return to work.

- ✓ Over the last year, long-term recipients were more likely to receive help with family needs from government programs (53.8%), adult children (47.1%), and parents (44.1%). They were least likely to receive help from co-workers (12.5%), professionals (17.6%), and neighbors (20.4%). It should also be noted that less than one-third of the long-term population received assistance from churches (32.1%), other relatives (32.9%), or their spouse/partner (20.7%). These findings are important in that many welfare reform measures rely upon private business, communities, and religious organizations to fill the gap in reduced government spending.

- ✓ According to a national study conducted by M. Straus and R. Gelles (1986), it is estimated that 5.8% of all marital relationships are abusive at a severe level. More specifically, it is estimated that 3.0% of all husbands severely physically abuse their wives. This is comparable to the findings in this study.

FACT:

None of the respondents report getting drunk on alcohol daily.

...From this analysis, it is estimated that approximately 5.2% of the long-term AFDC population is currently at risk for chemical dependency.

✓ Fifty-three (15.1%) respondents indicated they were physically abused at the very severe level (using the violence severity index) as children by their parents (see Table 27). The occurrence of very severe physical abuse in the long-term AFDC population is higher than national estimates for the general population. Survey participants were also asked *"When you were growing up, were you ever sexually abused (by this we mean, unwanted touching, sexual assault, or rape) by a family member or others?"*.

✓ Ninety-four (22.3%) of the survey respondents reported they had been sexually assaulted as children. The average age at which the sexual abuse first occurred was 9.9 years. Further analysis reveals that 25 of these individuals were both physically and sexually abused as children. Overall, 122 respondents (33.7%) were victims of child sexual and physical abuse. These findings suggest that 33% of the long-term AFDC recipient population may need therapeutic counseling or psychiatric treatment to increase their employability.

✓ Almost 39% (160) of the respondents were concerned at some time that they might have a problem such as Depression, Schizophrenia, Neurosis, Manic Depressive Disorder, etc. Ninety-four (23.4%) of the respondents have sought help for these problems. Primary diagnoses reported by the respondents include Depression, Neuroses, Anxiety, Schizophrenia, Bipolar/Manic Depressive Disorder, General Mental Health problems, Addiction, Chronic Pain, and Post Traumatic Stress Disorder. Sixty-two of the respondents who sought professional help reported they are currently on medication which includes antidepressants, antipsychotics, anxiolytics, antiepileptics, and narcotic addiction maintenance.

✓ None of the respondents reported getting drunk on alcohol daily. Approximately 10% reported getting drunk on alcohol about once a month followed by 4.5% getting drunk several times a month, and 1.2% getting drunk several times a week. Nine (4.8%) respondents indicated they get high on drugs about once a month followed by 3.2% (6) getting high several times a week, 2.7% (5) getting high several times a month, and one (0.5%) getting high daily. Respondents who reported they got high or drunk daily, weekly, or several times a month, are at high risk for chemical dependency if not already dependent. From this analysis, it is estimated that approximately 5.2% of the

FACT:

Listed in the top five recommendations of changes in the AFDC program: Stop Fraud.

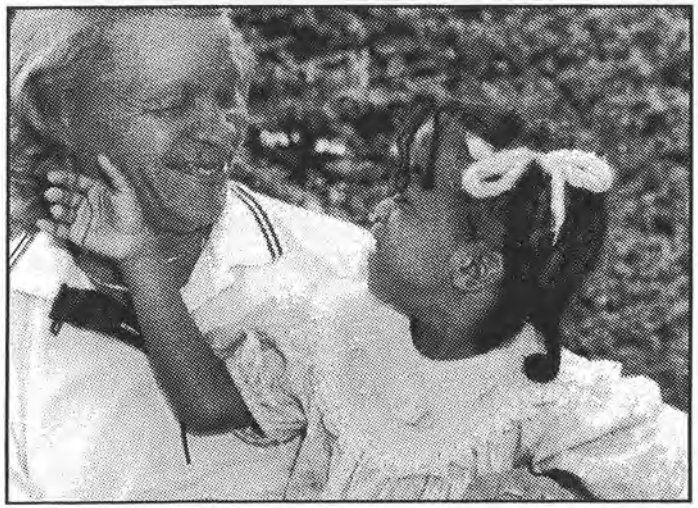
long-term AFDC population is currently at risk for chemical dependency.

✓ The final question of the survey asked participants, "If you were the director of DHS, what changes would you make in the AFDC program?" A total of 35 different recommendations were made by recipients, including recipients who felt no changes were necessary. The top five recommendations were as follows:

1. improve job training;
2. increase monthly benefits;
3. stop fraud;
4. continue benefits after recipients obtain a job; and
5. improve medical assistance while on AFDC and after obtaining a job.

SECTION I:

DEMOGRAPHIC PROFILE INTRODUCTION



This section identifies demographic trends among payees of Aid to Families with Dependent Children (AFDC) who have received benefits for 10 or more continuous years. The data for 1,118 cases were compiled from a total of 46,250 AFDC cases active in Oklahoma during June 1994. The long-term AFDC cases under investigation in this study comprise 2.4 percent of this total. Of the 1,118 cases, 650 payees (58 percent) have their needs included in the grant and the needs of the remaining 468 payees (42 percent) are not included in the grant. Comparisons made with the total population on grant inclusion status indicate that 86 percent of all AFDC cases are included in the grant and 14 percent are not included in the grant. The information presented describes the adult payee in the household. The payee is defined as the person to whom the check for the grant is made payable.

The findings of this section are compared to the findings of Goldsteen and Goldsteen in "Aid to Families With Dependent Children: Payee Study." The Goldsteens' study utilized a random sample of all AFDC recipients in 1993.

DEMOGRAPHIC CHARACTERISTICS OF LONG-TERM AFDC PAYEES

TABLE 1: PAYEE AGE

Age In Years	AFDC Recipients 10 Years+	AFDC Goldsteen Sample %
19 and under	0.6%	7.1%
20-29	3.3%	39.6%
30-39	42.8%	31.1%
40-49	27.8%	13.2%
50-59	13.7%	5.4%
60 and over	11.8%	3.6%

Payee Age

Ages ranged from 18 to 87 years. The most typical category was 30-39 years with almost 43 percent of the payees in this category. About 71 percent of the payees were between the ages of 30 to 49. Table 1 displays the distribution of age.

In contrast with the Goldsteen study, the age of the long-term payees tends to be older. Just over 3 percent of the long-term payees are in the age category 20-29 compared to almost 40 percent in the Goldsteen study. The most typical category of age for long-term payees is 30-39 years, while the most typical category of age in the Goldsteen study was 20-29 years.

CHART 1: LONG-TERM RECIPIENTS/AGE

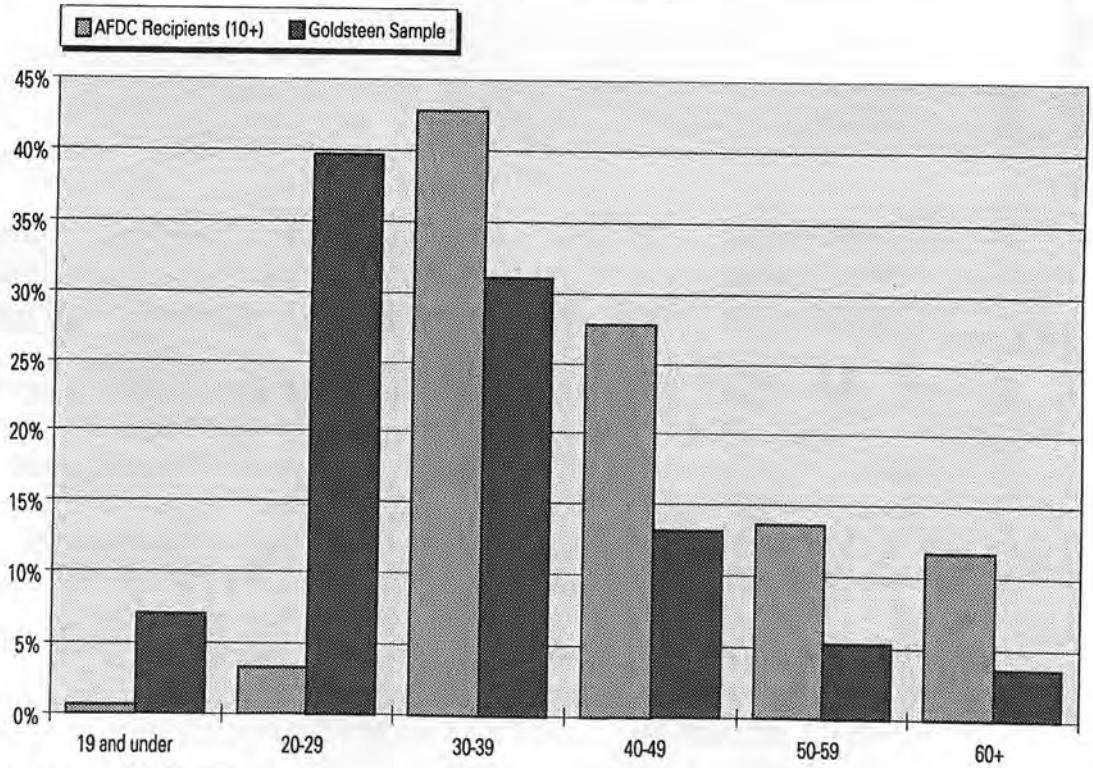


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TABLE 2: GENDER

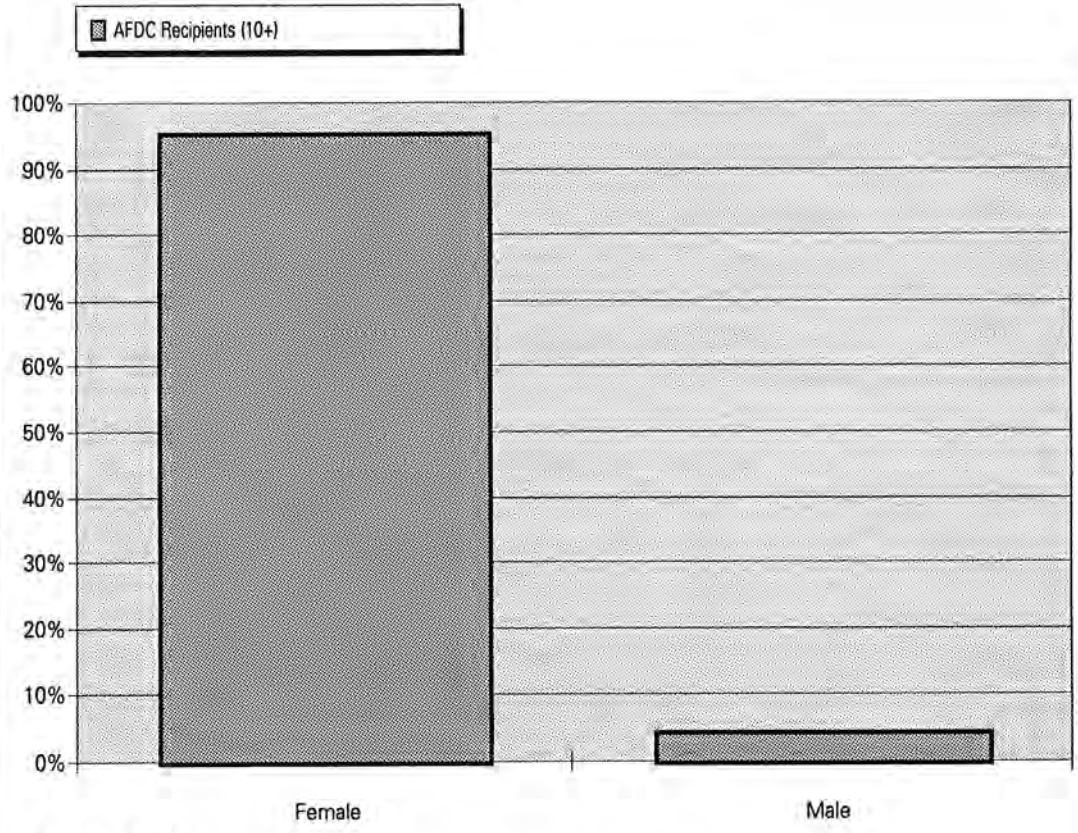
Gender of Payee	Percent
Female	95.5%
Male	4.5%

Payee Gender

Females overwhelmingly comprised the majority of the long-term AFDC cases. Table 2 shows the gender distribution.

In the Goldsteen study, only 4 of the 247 parent payees, or 1.6 percent, were fathers. Since the Goldsteen study divides the sample into parent and non-parent categories, comparison of gender becomes difficult. The non-parent category is concluded as consisting of primarily grandmothers but also includes aunts and other relatives.

CHART 2: LONG-TERM RECIPIENTS/GENDER



PERSONS

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SECTION I

TABLE 3: RACE AND ETHNICITY

Payees by Race	AFDC Recipients 10 Years+ %	Goldsteen %
African American	53.2%	27.5%
White	34.2%	52.9%
Native American	10.6%	12.5%
Hispanic	1.7%	5.7%
Asian	0.3%	0.7%
Other	N/A	0.7%

Payees Race and Ethnicity

Most of the long-term AFDC payees are African Americans (about 53 percent). Whites comprise the next largest group with about 34 percent (see Table 3). Native Americans make up less than 11 percent, Hispanics about 2 percent and Asians represent less than 1 percent of the total long-term payee population.

Comparison of race and ethnicity is dramatically different for the long-term payee study and the Goldsteens' sample. The percentage of African Americans in the long-term payee study is 53 percent compared to 28 percent, or more than double that found in the Goldsteen study. Whites, on the other hand, are much less likely to be long-term AFDC payees. For example, the category of white comprises 34 percent of the long-term payee cases whereas in the Goldsteen sample the category of white comprised almost 53 percent.

CHART 3: LONG-TERM RECIPIENTS/RACE AND ETHNICITY

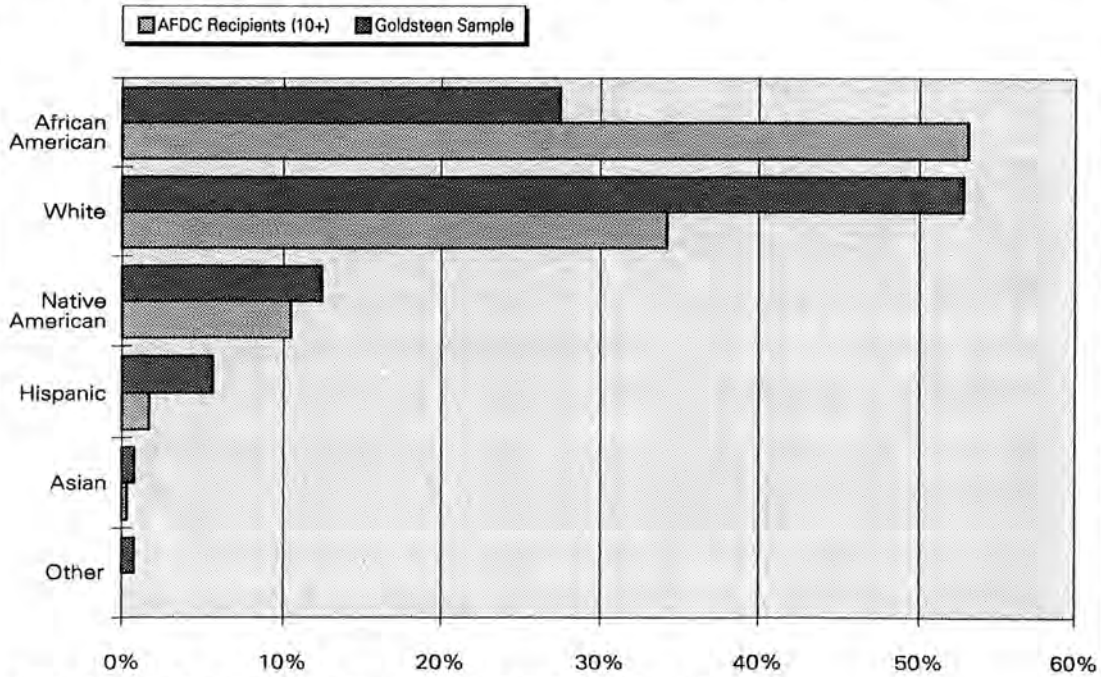

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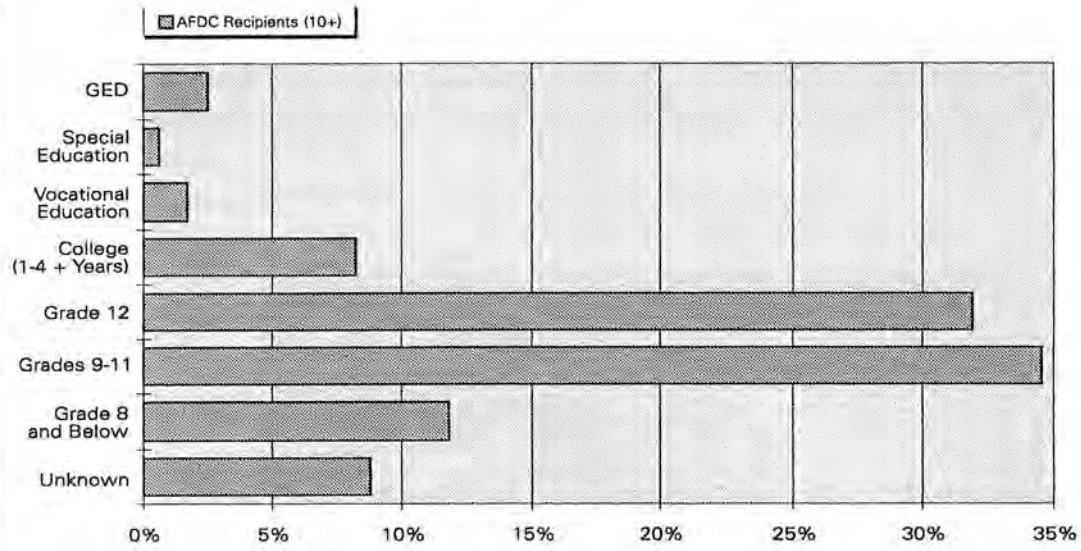
TABLE 4: PAYEE EDUCATION

Education	Percent
GED	2.5%
Special Education	0.6%
Vocational Education	1.7%
1-4+ years college	8.2%
12th	31.9%
9th -11th	34.5%
8th and under	11.8%
Unknown	8.8%

Education

Table 4 displays the distribution of the level of education completed by long-term AFDC payees. The largest group (almost 35 percent) reached a ninth through eleventh grade level. Approximately 12 percent reached an eighth grade level or under. About 32 percent of the payees had completed high school and just over 8 percent had completed one to four years of college. Almost 3 percent had received a General Educational Development (GED) certificate.

CHART 4: LONG-TERM RECIPIENTS/EDUCATION



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Marital Status

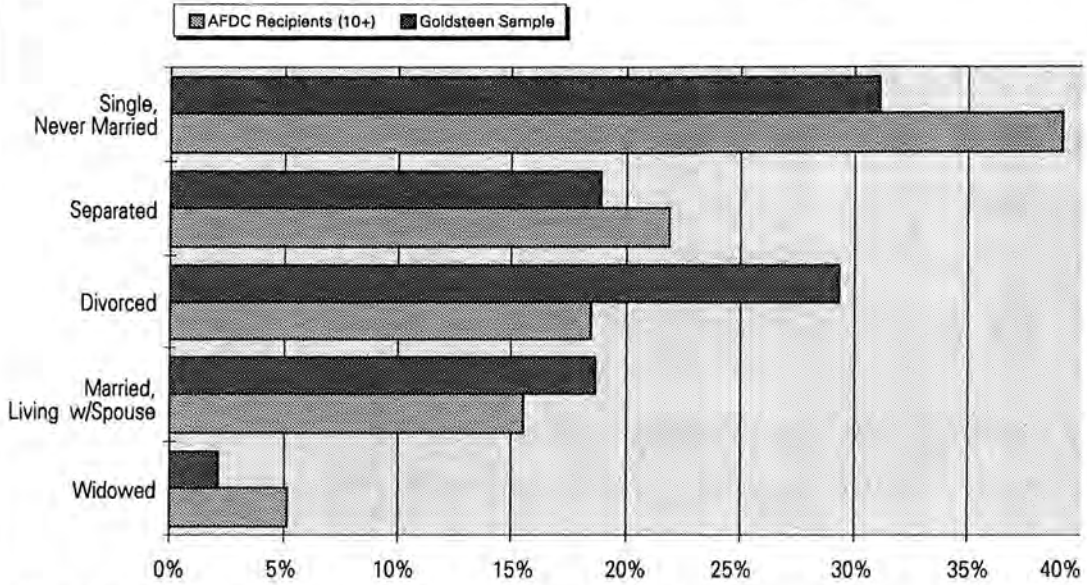
Thirty-nine percent of the long-term AFDC payees are single and have never been married. The second largest marital category (about 22 percent) is comprised of payees who are married but separated from their spouses without legal action. About 18 percent are divorced and almost 16 percent are married and living with their spouses. Table 5 shows the distribution of marital status.

SECTION I

TABLE 5: PAYEE MARITAL STATUS

Marital Status	AFDC Recipients 10 Years+ %	Goldsteen %
Single, never married	39.1%	31.1%
Separated	21.9%	18.9%
Divorced	18.4%	29.3%
Married, living w/spouse	15.5%	18.6%
Widowed	5.1%	2.1%

CHART 5: LONG-TERM RECIPIENTS/MARITAL STATUS



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The largest category for marital status in the Goldsteen study and the present study was single/never married (31 and 39 percent, respectively). The category of marital status which differed most between studies was in the divorced category. Twenty-nine percent of the respondents in the Goldsteen sample were divorced compared to 18 percent in this study. This difference resulted in a larger percent of long-term payees in the categories separated, 21.9, and widowed, 5.1, compared to the Goldsteen study in which they comprised 18.9 and 2.1 percent respectively.

CURRENT STATISTICS FOR TEN-YEAR AND LONGER AFDC CASES

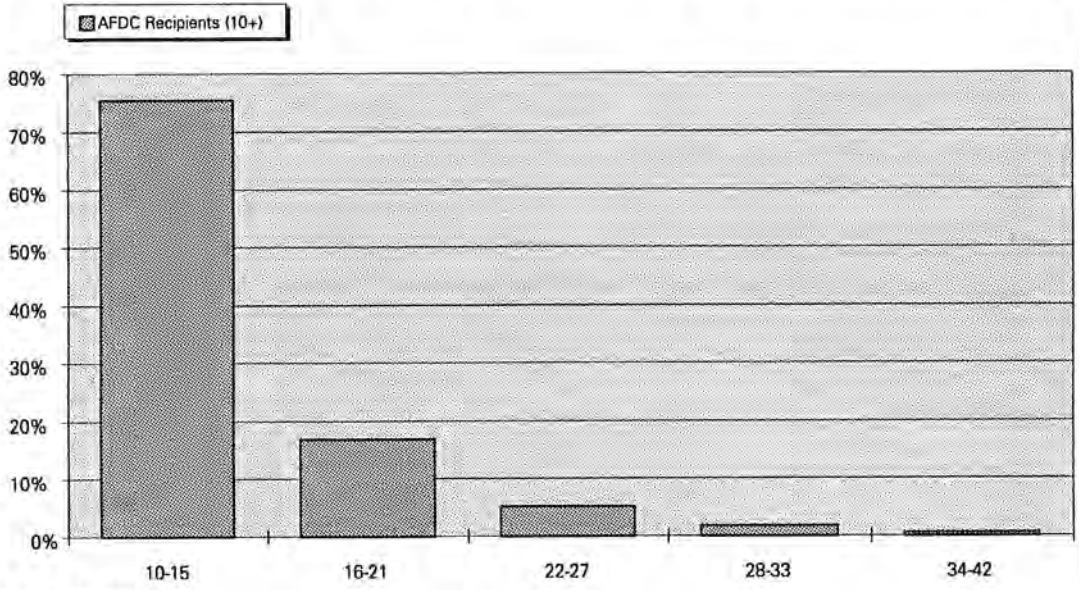
TABLE 6: YEARS ON AFDC ASSISTANCE

Number of Years	Percent
10-15	75.5%
16-21	17.0%
22-27	5.1%
28-33	1.7%
34-42	0.7%

Years on AFDC

The average number of years long-term payees remain on AFDC is 13.9 and ranges from 10-42 years. The most common amount of time payees remain on aid is 10 years. The median number of years is 12 years. Over 75 percent of long-term payees have been on AFDC assistance for 10-15 years. Seventeen percent have been on for 16 to 21 years. Table 6 shows the distribution of years on AFDC assistance.

CHART 6: LONG-TERM RECIPIENTS/YEARS ON ASSISTANCE



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SECTION I

TABLE 7: GRANT INCLUSION STATUS

Inclusion Status	Percent
Included	58.1%
Not Included	41.9%

GRANT INCLUSION

Of the total 1,118 long-term AFDC payees 58 percent are included in the AFDC grant. The remaining 42 percent are not included in the grant. Table 7 indicates the distribution of inclusion and non-inclusion in the AFDC grant.

CHART 7: LONG-TERM RECIPIENTS/GRANT INCLUSION STATUS

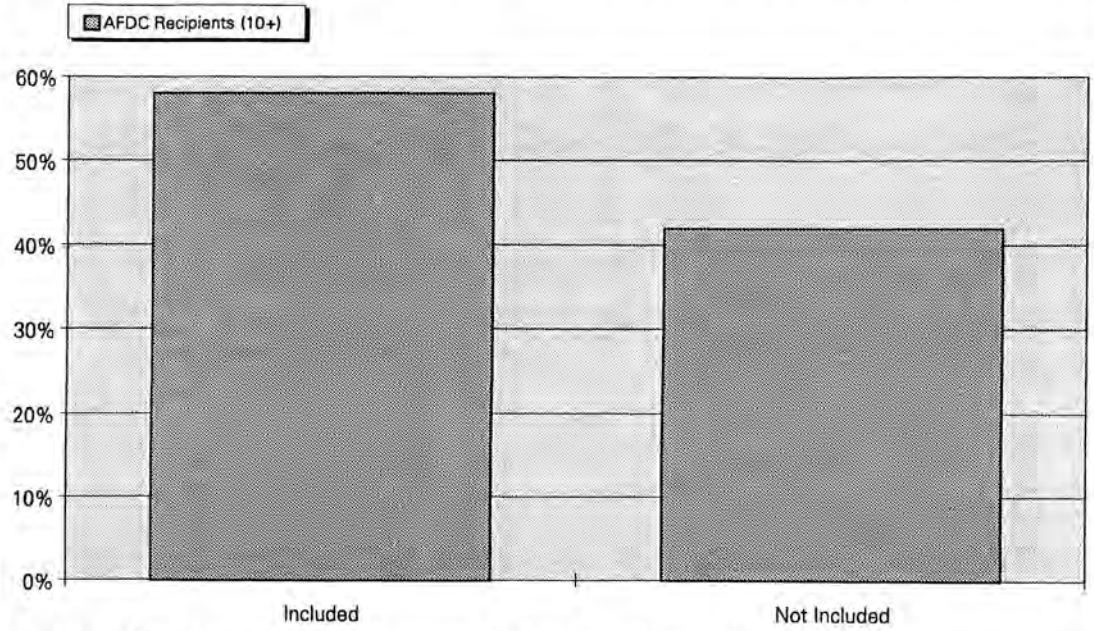

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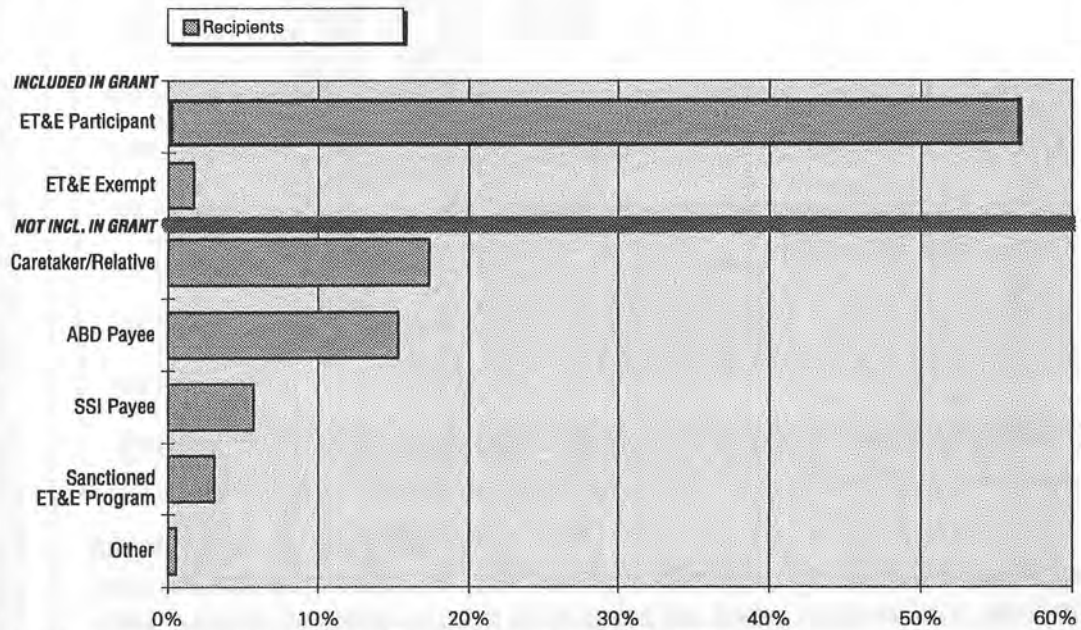
TABLE 8: AFDC GRANT INDICATORS

Grant Indicators	Percent
Included in grant	
ET&E participant	56.4%
ET&E exempt	1.7%
Not included in grant:	
Caretaker/relative	17.3%
ABD payee	15.3%
SSI payee	5.7%
Sanctioned ET&E program	3.1%
Other	0.5%

AFDC Grant Indicators

Of all long-term AFDC cases, 56 percent are included in the grant and are required to participate in the ET&E program. Two percent are included in the grant and not required to participate in the ET&E program. Caretaker/relatives not included in the grant make up the second most common category with 17 percent. Parents not included in the grant because they received Aid to Aged, Blind, or Disabled comprise 15 percent of the total. Another 5.7 percent consists of parents not included in the grant who received Supplemental Security Income benefits (without state supplements). Table 8 displays the distribution of grant indicators.

CHART 8: LONG-TERM RECIPIENTS/GRANT INDICATORS



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SECTION I

TABLE 9: NUMBER OF CHILDREN INCLUDED IN THE GRANT

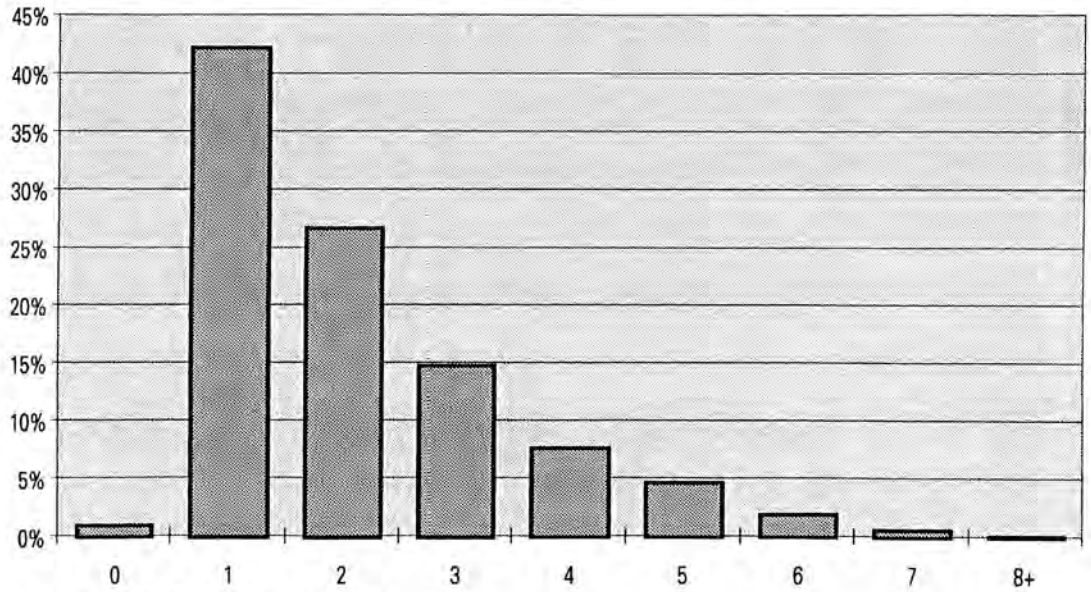
Number of Children	Percent
0	1.0%*
1	42.2%
2	26.8%
3	14.9%
4	7.8%
5	4.7%
6	1.9%
7	0.6%
8+	0.2%

* *Payee-only cases in which eligible child(ren) Receive SSI. Parent is automatically eligible for AFDC per Federal mandate.*

Number of Children Included in Grant

The distribution of the number of children included in the grant for long-term AFDC payees is shown in Table 9. The majority of cases (69 percent) included 2 or fewer children. A further breakdown indicates a little over 42 percent maintain provisions for one child and about 27 percent provide for two children. Fifteen percent include provisions for three children and almost 8 percent include four children. The remaining 8 percent of long-term AFDC grants include 5 to 10 children.

CHART 9: LONG-TERM RECIPIENTS/CHILDREN INCLUDED IN GRANT



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GRANT INCLUSION STATUS

TABLE 10: GRANT INCLUSION STATUS BY AGE

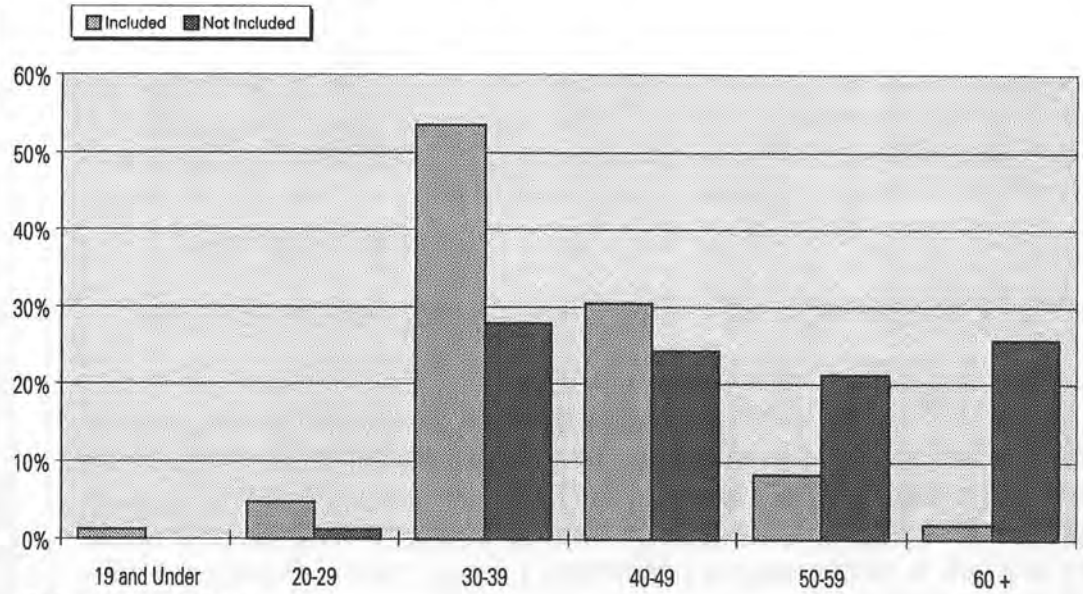
Age in Years	Included		Not Included	
19 and under	1.1%	(7)	.0%	(0)
20-29	4.8%	(31)	1.3%	(6)
30-39	53.5%	(348)	27.8%	(130)
40-49	30.5%	(198)	24.2%	(113)
50-59	8.3%	(54)	21.2%	(99)
60 and over	1.9%	(12)	25.6%	(120)

Group comparisons were made of the long-term cases on the basis of grant inclusion status. Grant inclusion status contains two groups: 1) those whose needs are included in the grant and 2) those who needs are not included in the grant. Differences between these groups are identified in age, marital status, number of children, and race/ethnicity.

Grant Inclusion by Age

In both groups, most of the cases fall within the ages of 30-49. Table 10 displays the distribution of grant inclusion by age. Eighty-four percent of payees included in the grant were between the ages of 30 and 49 compared to 52 percent of the payees not included in the grant. Similar differences are found in the age categories of 50 and above. Those not included in the grant tend to be older. Of those included in the grant approximately 10 percent are age 50 or older compared to approximately 47 percent of those not included in the grant.

CHART 10: GRANT INCLUSION STATUS



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SECTION I

TABLE 11: GRANT INCLUSION STATUS BY NUMBER OF CHILDREN

No. of Children	Included		Not Included	
0	1.7%	(11)*	0.0%	(0)
1	32.2%	(209)	56.2%	(263)
2	26.8%	(174)	26.9%	(126)
3	19.1%	(124)	8.0%	(42)
4	10.0%	(65)	4.7%	(22)
5	6.0%	(39)	2.7%	(13)
6	2.9%	(19)	0.4%	(2)
7	1.1%	(7)	0.0%	(0)
8+	0.3%	(2)	0.0%	(0)

* *Payee-only cases in which eligible child(ren) receive SSI. Parent is automatically eligible for AFDC per Federal mandate.*

Grant Inclusion by Number of Children

Whether included in the grant or not, most of the AFDC payees are in the category of having 1 child. Table 11 displays the distribution of grant inclusion by number of children. Of those payees who are included in the grant, 59 percent have 1 or 2 children and 29 percent have 3 or 4 children. Compared to those not included in the grant 83 percent have 1 or 2 children and approximately 13 percent have 3 or 4 children.

CHART 11: GRANT INCLUSION STATUS BY NUMBER OF CHILDREN

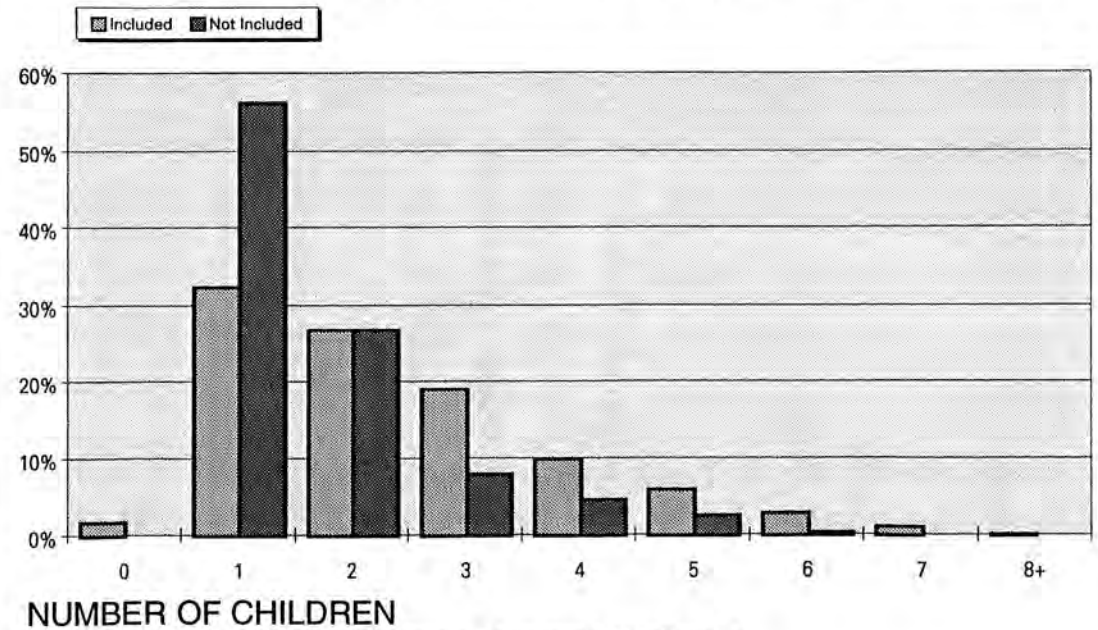

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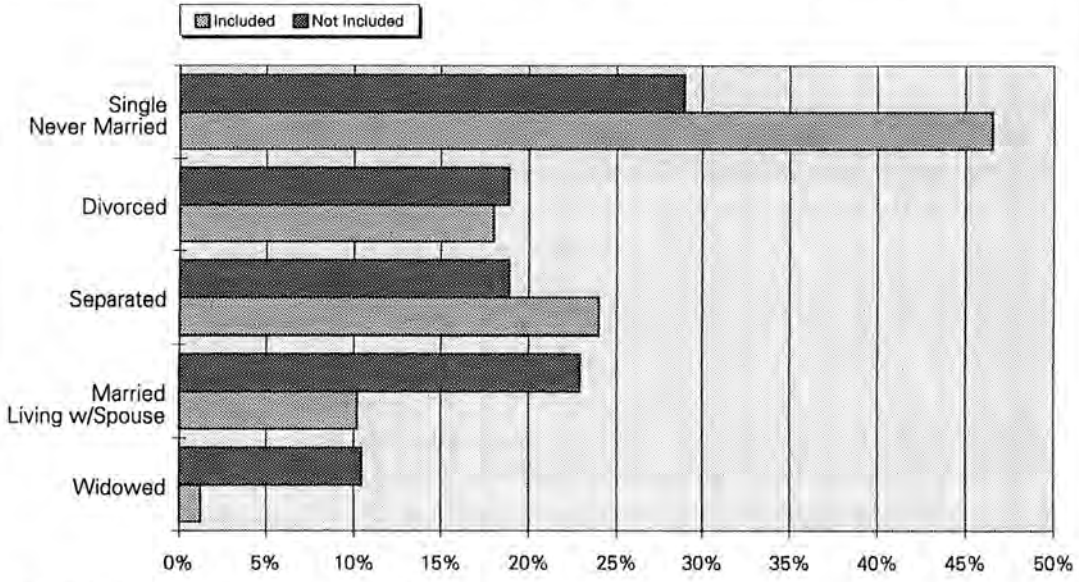
TABLE 12: GRANT INCLUSION STATUS BY MARITAL STATUS

Marital Status	Included	Not Included
Single/ never Married	46.5% (302)	28.9% (135)
Divorced	18.0% (117)	18.9% (88)
Separated	24.0% (156)	18.9% (88)
Married/ living w/Spouse	10.2% (68)	22.9% (108)
Widowed	1.2% (7)	10.5% (49)

Grant Inclusion by Marital Status

Table 12 contains the distribution of grant inclusion by marital status. A higher percentage of those included in the grant are in the category of single/never married as compared to those not included in the grant (47 percent and 29 percent respectively). Only 10 percent of those included in the grant are married/living with spouse compared to 23 percent of those not included in the grant.

CHART 12: GRANT INCLUSION STATUS BY MARITAL STATUS



PERCENTAGE OF ADULTS

Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

SECTION I

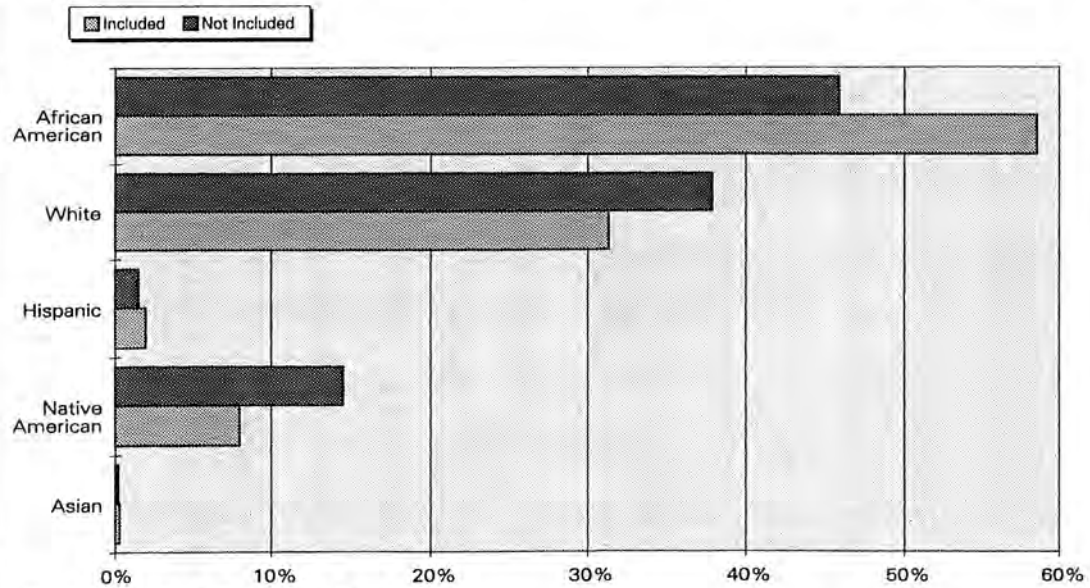
TABLE 13: GRANT INCLUSION STATUS BY RACE AND ETHNICITY

Payees by Race	Included		Not Included	
African American	58.5%	(380)	45.9%	(215)
White	31.3%	(205)	37.8%	(177)
Hispanic	1.9%	(12)	1.5%	(7)
Native American	7.9%	(51)	14.5%	(68)
Asian	0.3%	(2)	0.2%	(1)

Grant Inclusion by Race & Ethnicity

Of those included in the grant, about 59 percent are African American and just over 31 percent are white. Of those not included in the grant about 46 percent are African American and about 38 percent are white.

CHART 13: GRANT INCLUSION STATUS BY RACE AND ETHNICITY



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SECTION II:

LONG-TERM RECIPIENT WORK HISTORY

TABLE 14: LAST EMPLOYMENT BY DATE POSITION WAS HELD; AND DATE LAST POSITION WAS VACATED

Year	Last Job Held	Left Last Job
1950's	2 (0.7%)	2 (0.8%)
1960's	8 (2.9%)	7 (2.9%)
1970's	51 (18.2%)	42 (17.4%)
1980's	107 (38.3%)	101 (41.7%)
1980	10 (3.6%)	10 (4.1%)
1981	15 (5.4%)	16 (6.6%)
1982	17 (6.1%)	17 (7.0%)
1983	14 (5.0%)	13 (5.4%)
1984	6 (2.1%)	5 (2.1%)
1985	7 (2.5%)	4 (1.7%)
1986	5 (1.8%)	4 (1.7%)
1987	12 (4.3%)	12 (4.9%)
1988	7 (2.5%)	7 (2.9%)
1989	14 (5.0%)	13 (5.4%)
1990's	112 (39.9%)	90 (37.2%)
1990	16 (5.7%)	8 (3.3%)
1991	13 (4.6%)	16 (6.6%)
1992	18 (6.4%)	15 (6.2%)
1993	19 (6.8%)	19 (7.9%)
1994	46 (16.4%)	32 (13.2%)

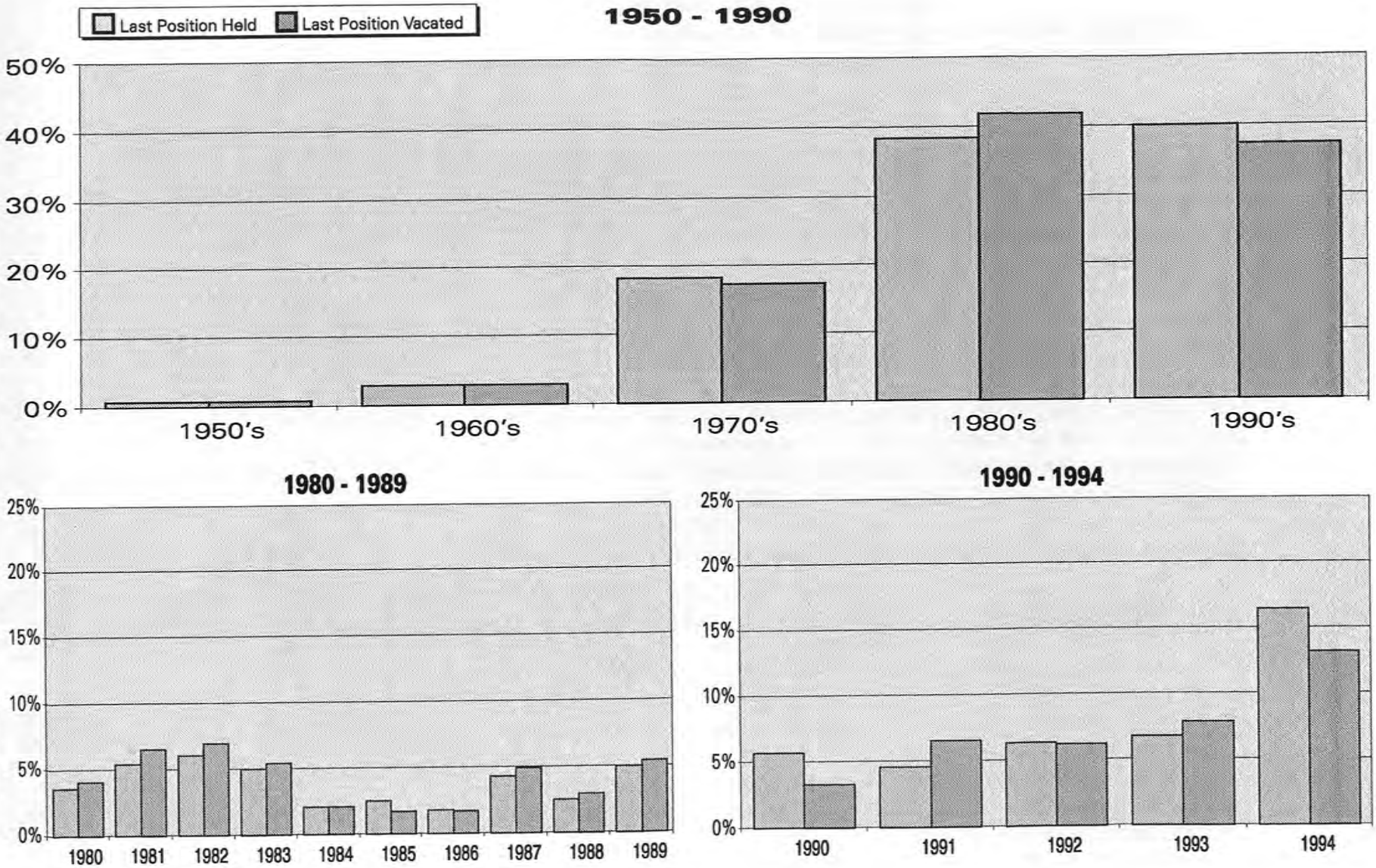
Respondents were asked to answer questions regarding past and present work history and future aspirations related to workforce participation. Approximately 79 percent of long-term AFDC recipients have been employed in the past. Only 20.6 percent (84) of the participants indicated they have never been employed with 7.5 percent (33) failing to respond. The longest period of time worked by most of the respondents was an average of 184 weeks with 25 percent reporting 32 weeks or less and 28 percent being gainfully employed between 192 and 2,880 weeks. Overall, 40 percent of the recipients indicated the last job they held was between 1990 and 1994 . (The clients' reported work activity did include required DHS employment programs.)

Thirty-eight percent indicated they were employed sometime during the 1980s, with 21.8 percent indicating their last employment was sometime between 1952 and 1979 with no employment since 1979 (see Table 14). On average recipients worked 28.7 hours per week on their last reported job with 25 percent of the respondents working 13.5 hours per week or less and 23 percent working between 20 and 37 hours per week. Approximately forty-five percent indicated they worked 40 hours per week at their last job with four percent indicating they worked between 45 and 80 hours per week at their last job.

The average hourly pay for persons who held their last job in the 1950s was $1.00 per hour (1950s: Min. Wage was $0.75 - $1.00). Similarly the average hourly pay for persons who held their last job in the 1960s was $2.67 per hour (1960s: Min. Wage was $1.15 - $1.60). The average hourly wage reported by recipients working in the 1970s increased from the 1960s to $3.59 per hour (1970s: Min. Wage was $1.60 - $2.90).

The average hourly wage increased in the 1980s with the average hourly wage being reported at $4.27 per hour (1980s: Min. Wage was $3.10 - $3.35). The average reported hourly wage for recipients working in the 1990s remains at a level similar to the 1980s – $4.42 per hour (1990s: Min Wage was $3.80 - $4.25 presently) (see Table 15).

CHART 14: LAST EMPLOYMENT BY DATE OF LAST POSITION & LAST POSITION VACATED



LONG-TERM AFDC RECIPIENTS

Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

TABLE 15: HOURLY WAGE OF LONG-TERM RECIPIENTS BY YEAR OF LAST JOB INCLUDING REQUIRED MINIMUM WAGE STANDARDS

Reported Wage ($)	1950's (M.W. 0.75-1.00)	1960's (M.W. 1.15-1.60)	1970's (M.W. 1.60-2.90)	1980's (M.W. 3.10-3.35)	1990's (M.W. 3.80-4.25)
0.75-1.00	1 (50%)	0 (0.0%)	1 (2.7%)	1 (1.2%)	3 (3.6%)
1.01-1.50	1 (50%)	1 (16.6%)	2 (5.4%)	0 (0.0%)	2 (2.4%)
1.51-2.00	0 (0.0%)	1 (16.6%)	2 (5.4%)	2 (2.4%)	0 (0.0%)
2.01-2.50	0 (0.0%)	1 (16.6%)	6 (16.2%)	2 (2.4%)	1 (1.2%)
2.51-3.00	0 (0.0%)	1 (16.6%)	7 (24.3%)	4 (4.9%)	5 (6.0%)
3.01-3.50	0 (0.0%)	1 (16.6%)	4 (10.8%)	30 (36.8%)	5 (6.0%)
3.51-4.00	0 (0.0%)	1 (16.6%)	4 (10.8%)	16 (19.5%)	7 (8.3%)
4.01-4.50	0 (0.0%)	0 (0.0%)	3 (8.1%)	9 (11.0%)	37 (43.9%)
4.51-5.00	0 (0.0%)	0 (0.0%)	2 (5.4%)	7 (8.5%)	13 (15.5%)
5.01-5.50	0 (0.0%)	0 (0.0%)	1 (2.7%)	2 (2.4%)	2 (2.4%)
5.51-6.00	0 (0.0%)	0 (0.0%)	2 (5.4%)	4 (4.9%)	4 (4.8%)
6.01-6.50	0 (0.0%)	0 (0.0%)	0 (0.0%)	3 (3.7%)	0 (0.0%)
6.51-7.00	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
7.01-7.50	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	2 (2.4%)
7.51-8.00	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	3 (3.6%)
8.01-18.00	0 (0.0%)	0 (0.0%)	1 (2.7%)	2 (2.4%)	0 (0.0%)
Avg. Recip. Wage	$1.00	$2.67	$3.59	$4.27	$4.42

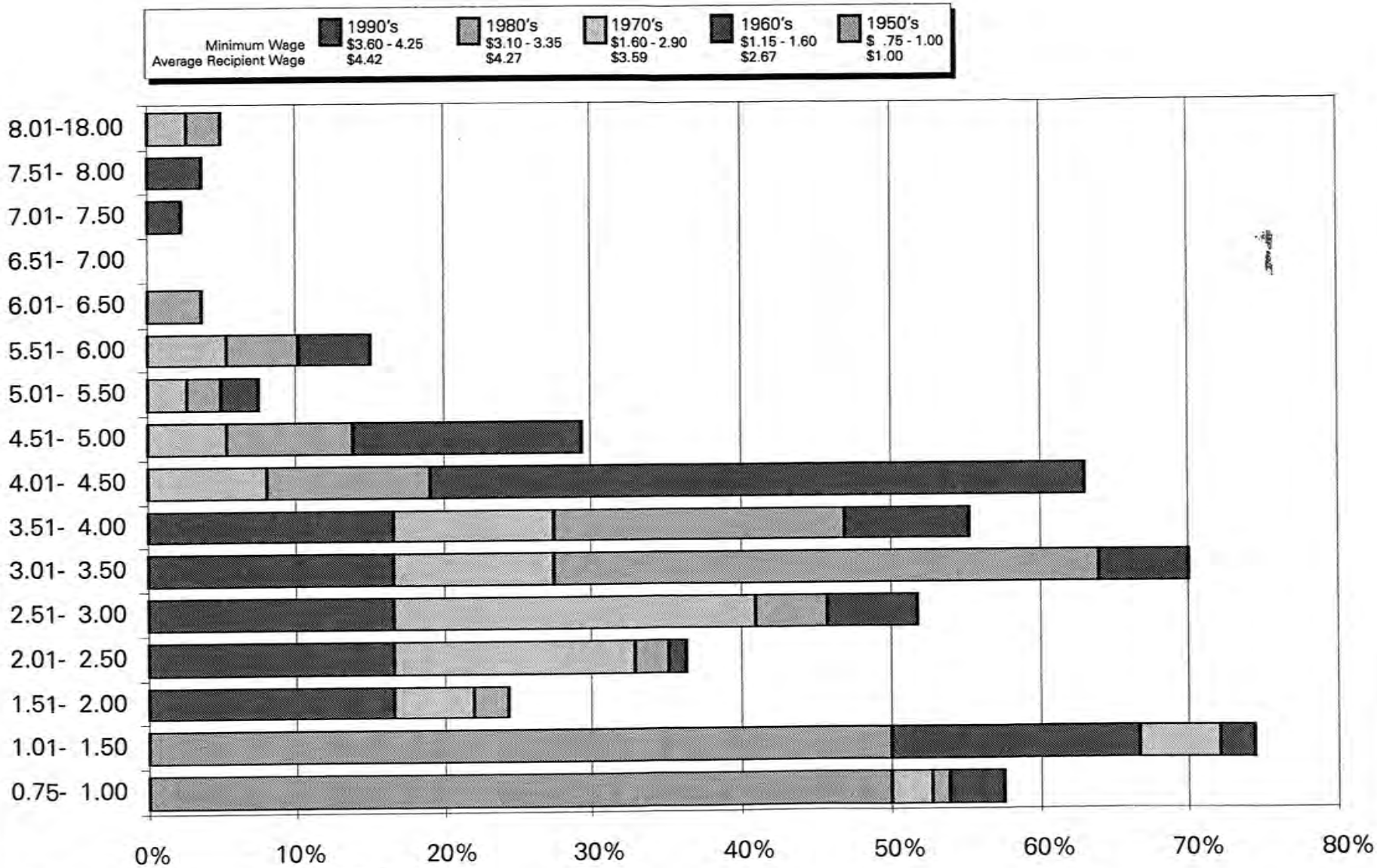
Prepared by Office of Management Services, Research, Evaluation & Statistics Unit (6/95)

Service-related jobs comprise the majority of past employment overall for long-term recipients (66.1%). This includes housekeeping, laundry, baby sitting/day care, restaurants, etc. Twenty-two percent (71) of the respondents have held secretarial and/or clerical positions followed by 17.2% (55) in laborer positions; 12.5% (40) in trade-related positions (i.e. carpentry, seamstress, etc.); and 12.3% (39) in other non-specified positions.

The *last* employment positions held by long-term recipients are slightly different from overall past work history with 51.4% (161) of the respondents in service sector positions, 12.8% (40) in other non-specified employment; 9.9% (31) in professional positions; and 8.9% (28) in clerical/secretarial positions (see Table 16). Thirty-eight percent (107) of the respondents left their last job between 1980 and 1989, with another 39.9% (83) leaving their last positions between 1990 and 1994 (see Table 14). However, 12 (3.0%) of the survey participants indicate that they are currently employed at some level.

The major reasons given for leaving the work force include health-related problems (28.2%; 75); personal problems (13.2%; 35); laid off the job (12.0%; 32); not paid enough money (7.1%; 19); employment was only temporary (7.1%; 19); and business closed (7.1%;19) (see Table 17a -b). Approximately 30 percent (118) of the respondents stated they were currently looking for employment. Sixty-seven percent stated they were not looking for employment at this time. And three percent (12) are currently employed at this time.

CHART 15: HOURLY WAGE BY YEAR OF LAST POSITION



LONG-TERM AFDC RECIPIENTS

Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

TABLE 16: LONG-TERM AFDC RECIPIENT EMPLOYMENT HISTORY "PAST, PRESENT, AND FUTURE*"

Job Type	Past Jobs	Last Job	Future Interest
Clerical/Secretarial			
Percent	22.3	8.9	14.7
Number	71	28	38
Service (Restaurant, Gas Station, etc.)			
Percent	66.1	51.4	53.5
Number	211	161	138
Trades, (Carpenter, Seamstress, etc.)			
Percent	12.5	5.4	3.9
Number	40	17	10
Professional			
Percent	9.4	9.9	11.6
Number	30	31	30
Sales			
Percent	7.5	3.8	0.4
Number	24	12	1
Managerial			
Percent	2.5	0.4	0
Number	8	1	0
Laborer			
Percent	17.2	7.3	2.3
Number	55	23	6
Other			
Percent	12.3	12.8	0
Number	39	40	0
None			
Percent	N/A	N/A	2.7
Number	N/A	N/A	7
Any Job			
Percent	N/A	N/A	10.1
Number	N/A	N/A	26
Already Employed			
Percent	N/A	N/A	0.8
Number	N/A	N/A	2

"* Columns may not add to 100%, multiple responses were allowed."

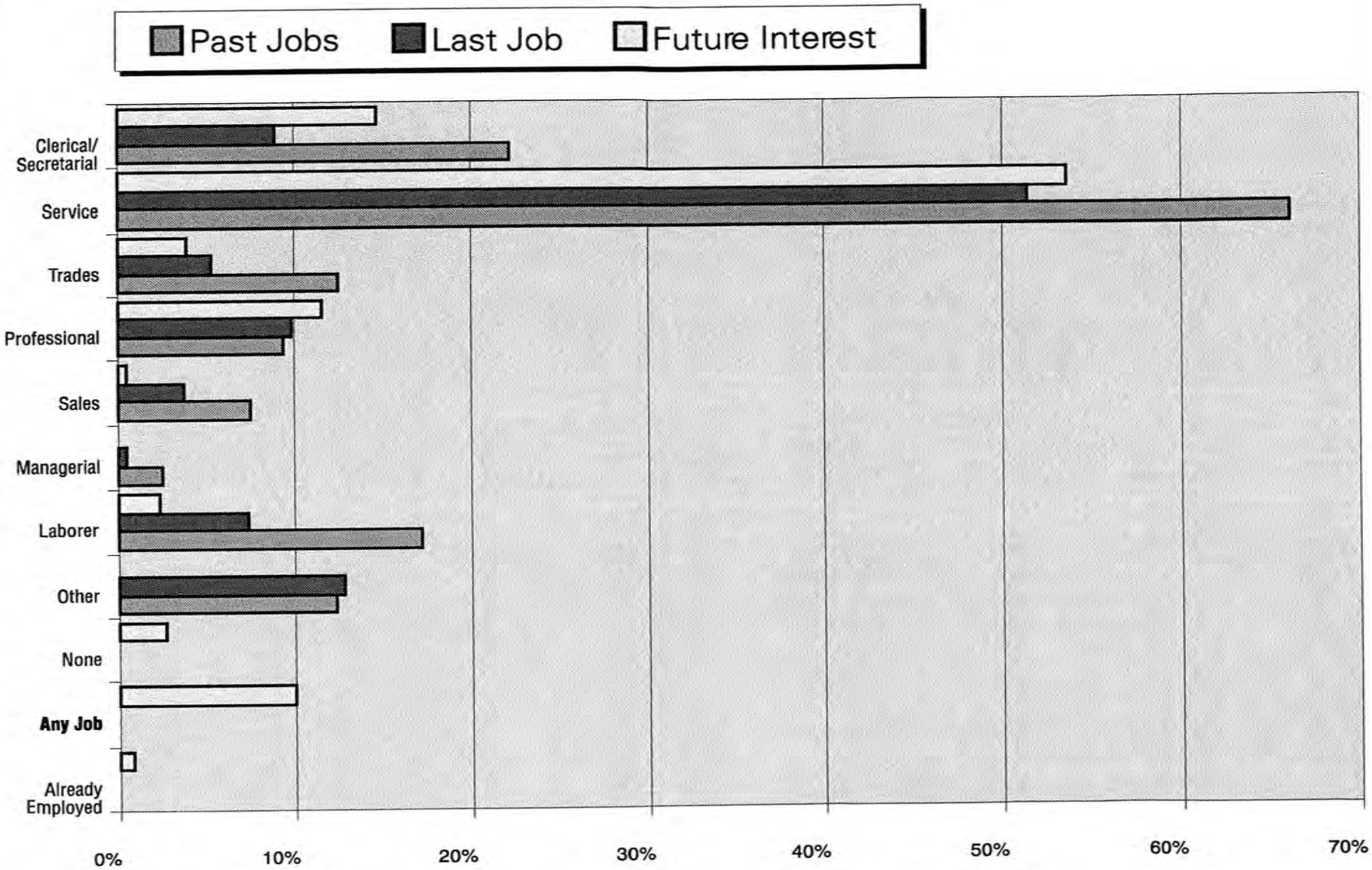
Four major groups of barriers to *obtaining* employment were identified by survey participants--internal barriers, basic need barriers, external barriers, and the inability to work.

Internal barriers to employment refer to individual self-improvement and transportation needs. Approximately 52 percent (156) of the respondents stated they lacked transportation, 49 percent (147) lacked education and training, and 48.7 percent (145) reported a lack of work-related experience (see Table 18a-b).

Many of the respondents reported that a loss of public assistance benefits hindered their efforts in finding work (basic need barriers). Approximately 40 percent (118) of the respondents indicated they currently have an illness that limits their ability to find suitable employment. In addition, 45.9 percent (134) indicated the loss of medical cards was a hinderance in finding employment, followed by a loss of public assistance checks (36.7%; 106). External barriers identified included inability to find work they are qualified to perform (36.1%; 103), and inability to find employment at all (47.6%; 139).

The fourth group was individuals who reported they could not work. The largest group of respondents in this category was those who reported they were permanently disabled (43%; 126). All of these barriers are statistically inter-related. This finding indicates that solutions need to be implemented simultaneously in order to effect a significant reduction in dependence.

CHART 16: EMPLOYMENT HISTORY AND FUTURE INTEREST[1]



[1] *Columns may not add to 100%, multiple responses were allocated.*
Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

TABLE 17a: FACTORS RELATED TO EMPLOYMENT TERMINATION, OBTAINING AFDC BENEFITS, AND CONTINUED RECEIPT OF BENEFITS

Factors	Terminated Employment	Initial Use of AFDC	Continued Use of AFDC
Couldn't Find a Job	0.0 (0)	51.7 (201)	15.9 (70)
Change in Marital Status:	0.4 (1)	41.7 (163)	0.0 (0)
Marriage	0.4 (1)	0.0 (0)	0.0 (0)
Separated or Divorced	0.0 (0)	41.7 (163)	0.0 (0)
Lost Employment:	34.0 (91)	28.3 (108)	0.0 (0)
Terminated	3.8 (10)	N/A	N/A
Laid Off	12.0 (32)	N/A	N/A
Temp. Position	7.1 (19)	N/A	N/A
Job Training Ended	4.1 (11)	N/A	N/A
Business Closed	7.1 (19)	N/A	N/A
Pregnancy/Birth	9.4 (25)	57.5 (222)	0.0 (0)
Day Care Expense	0.0 (0)	36.8 (141)	1.6 (7)
Personal Problems	13.2 (35)	37.9 (148)	2.5 (11)
Low Wages	7.1 (19)	36.1 (139)	0.0 (0)
Illness/Health	28.2 (75)	39.1 (150)	23.0 (101)
Perm. Disability	0.0 (0)	36.9 (142)	12.7 (56)
Sick/Disabled Family Member	0.0 (0)	29.3 (113)	7.5 (33)
Problems With Child Support	0.0 (0)	31.4 (119)	3.9 (17)
Alcohol & Drug Abuse	0.0 (0)	6.6 (25)	0.0 (0)
Job Training and Education	0.0 (0)	0.9 (4)	14.1 (62)
Transportation	5.6 (15)	0.5 (2)	7.0 (31)

Prepared by Office of Management Services, Research, Evaluation & Statistics (5/95)

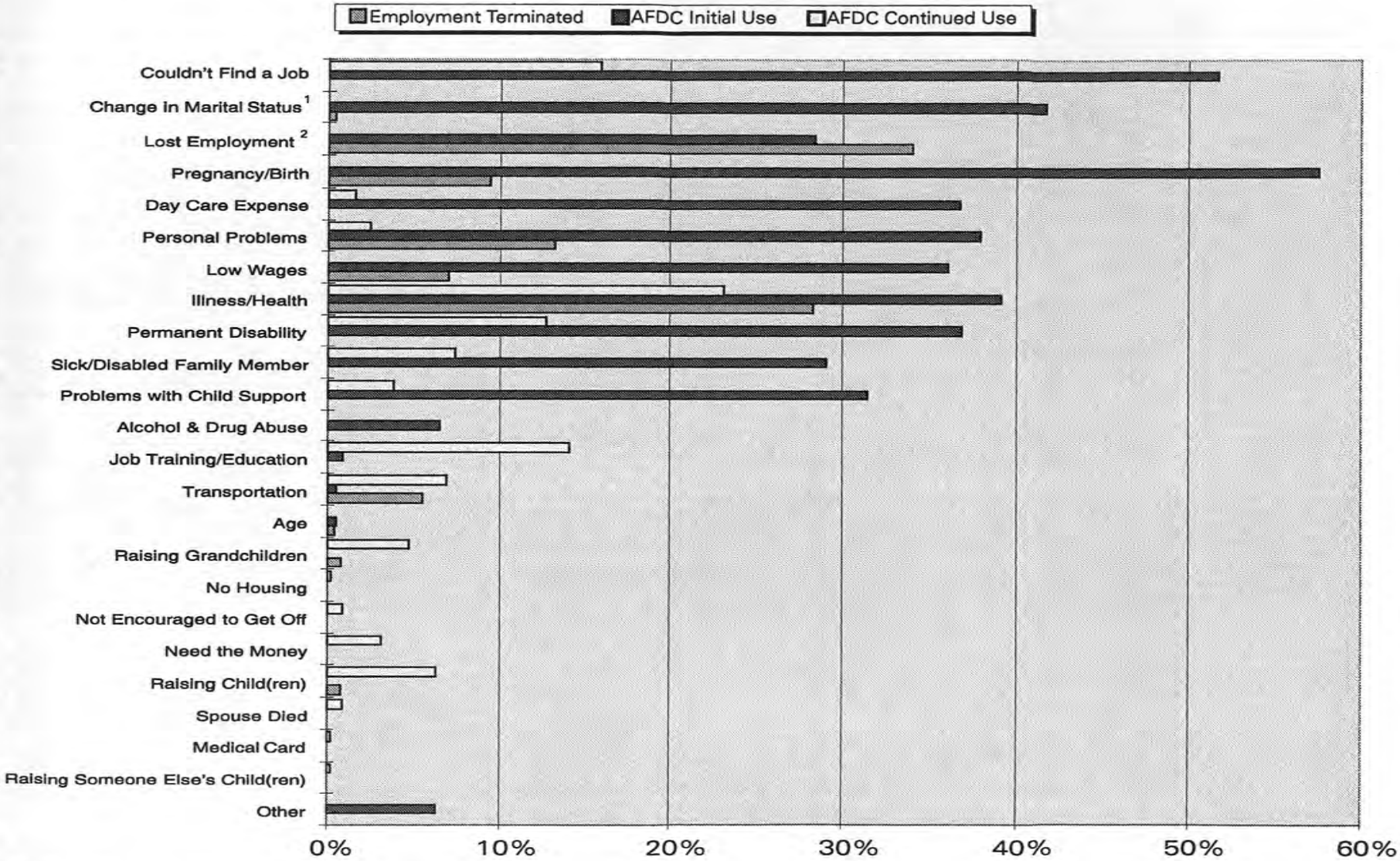
When clients were asked "What type of employment would you be most interested in?" the results were very similar to employment patterns of past jobs. Approximately 53 percent of the respondents indicated they would be most interested in service-related jobs. An additional 14.7 percent indicated they would like to find clerical/secretarial employment. Thirty (11.6%) of the respondents indicated they would like a professional position and 10.1% would take ANY job.

TABLE 17b: FACTORS RELATED TO EMPLOYMENT TERMINATION, OBTAINING AFDC BENEFITS, AND CONTINUED RECEIPT OF BENEFITS"

Factors	Terminated Employment	Initial Use of AFDC	Continued Use of AFDC
Age	0.4 (1)	0.5 (2)	0.0 (0)
Raising Grandchildren	0.8 (2)	N/A	4.8 (21)
No Housing	0.0 (0)	N/A	0.2 (1)
Not Encouraged to Get Off	0.0 (0)	N/A	0.9 (4)
Need the Money	0.0 (0)	N/A	3.2 (14)
Raising Child(ren)	0.8 (2)	N/A	6.4 (28)
Spouse Died	0.0 (0)	N/A	0.9 (4)
Medical Card	0.0 (0)	N/A	0.2 (1)
Raising Someone Else's Children	0.0 (0)	N/A	0.2 (1)
Other	0.0 (0)	6.4 (19)	0.0 (0)

Prepared by Office of Management Services, Research, Evaluation and Statistics Unit (5/95)

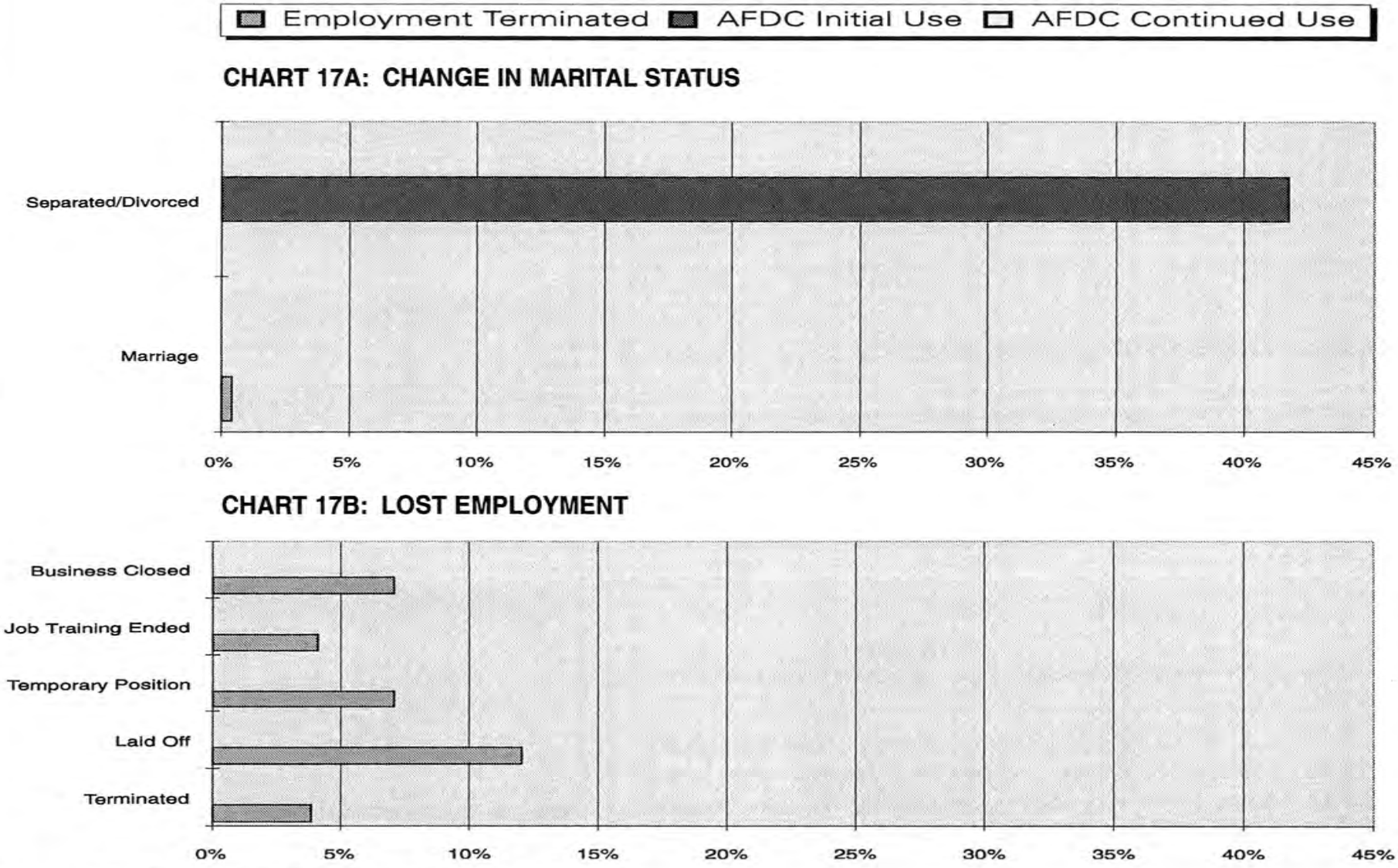
CHART 17: FACTORS RELATED TO EMPLOYMENT TERMINATION OBTAINING AFDC BENEFITS AND CONTINUED RECEIPT OF BENEFITS



[1] *See Chart 17A for details* [2] *See Chart 17B for details*

Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

CHART 17A and 17B: FACTORS RELATED TO EMPLOYMENT TERMINATION, OBTAINING AFDC BENEFITS AND CONTINUED RECEIPTS OF BENEFITS



Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

TABLE 18a: BARRIERS TO LONG-TERM AFDC RECIPIENT EMPLOYMENT

Reasons	Always	Sometimes	Rarely	Not At All
Work Qualified For Not Available				
Percent	19.3	16.8	3.9	60
Number	55	48	11	171
Can't Find Work				
Percent	29.1	18.5	2.7	49.7
Number	85	54	8	145
Lack of Education and Training				
Percent	34.7	14.3	2.3	48.7
Number	104	43	7	146
Lack of Experience				
Percent	34.2	14.4	4.4	47
Number	102	43	13	140
No Transportation				
Percent	39.6	12.8	3.7	44
Number	118	38	11	131
Too Young/Old				
Percent	14.8	9.3	7.9	68
Number	43	27	23	198
Permanent Disability				
Percent	35.2	7.8	2.4	54.6
Number	103	23	7	160
Disabled Family Member				
Percent	16	7.5	2.7	73.7
Number	47	22	8	216

Prepared by Research, Evaluation and Statistics (5/95)

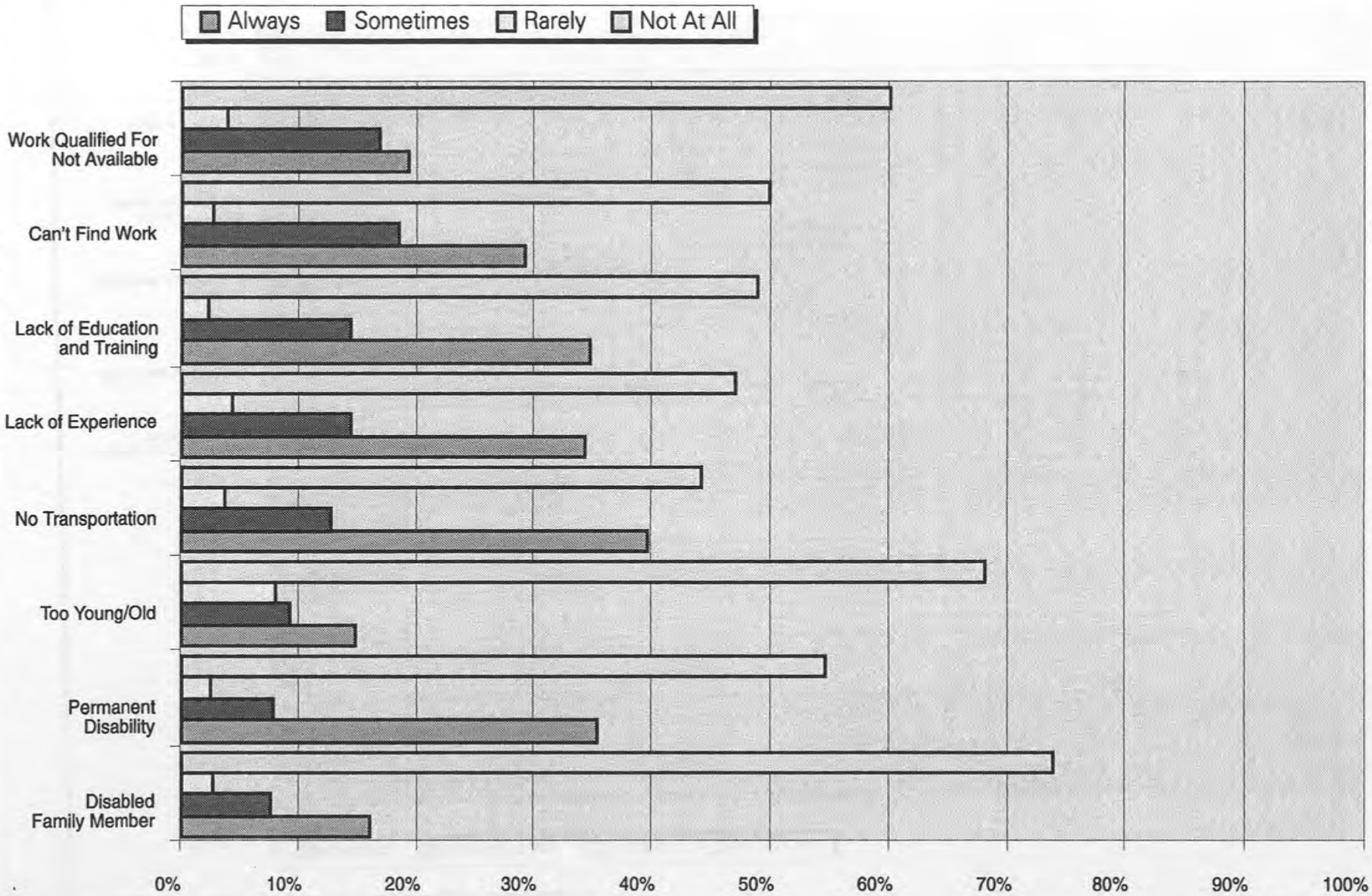
It is important to note the majority of respondents are interested in the type of employment that more than likely would not provide enough income and/or benefits to successfully end dependence on public assistance. In light of these findings, it is also noteworthy that the majority of respondents see the loss of public assistance checks and medical benefits as a barrier to finding employment and remaining employed (see Table 16).

TABLE 18b: BARRIERS TO LONG-TERM AFDC RECIPIENT EMPLOYMENT

Reasons	Always	Sometimes	Rarely	Not At All
Child Care				
Percent	13.4	8	3.7	74.9
Number	40	24	11	224
Pregnant				
Percent	2.4	1.7	1.7	94.2
Number	7	5	5	276
In School or Training				
Percent	10.9	5.5	5.5	78.2
Number	32	16	16	229
Illness				
Percent	26.6	13.7	4.4	55.3
Number	78	40	13	162
Choose to Stay Home With Children				
Percent	11.5	8.7	5.9	73.9
Number	33	25	17	212
Children in Trouble				
Percent	11.3	9.9	3.9	74.8
Number	32	28	11	211
Loss of Medical Assistance Card				
Percent	36.3	9.6	4.5	49.7
Number	106	28	13	145
Loss of Public Assistance Check				
Percent	28	8.7	5.5	57.8
Number	81	25	16	167
Loss of Public Housing				
Percent	19.2	4.3	3.2	73.3
Number	54	12	9	206
Other				
Percent	6.7	2.5	1.2	89.6
Number	11	4	2	146

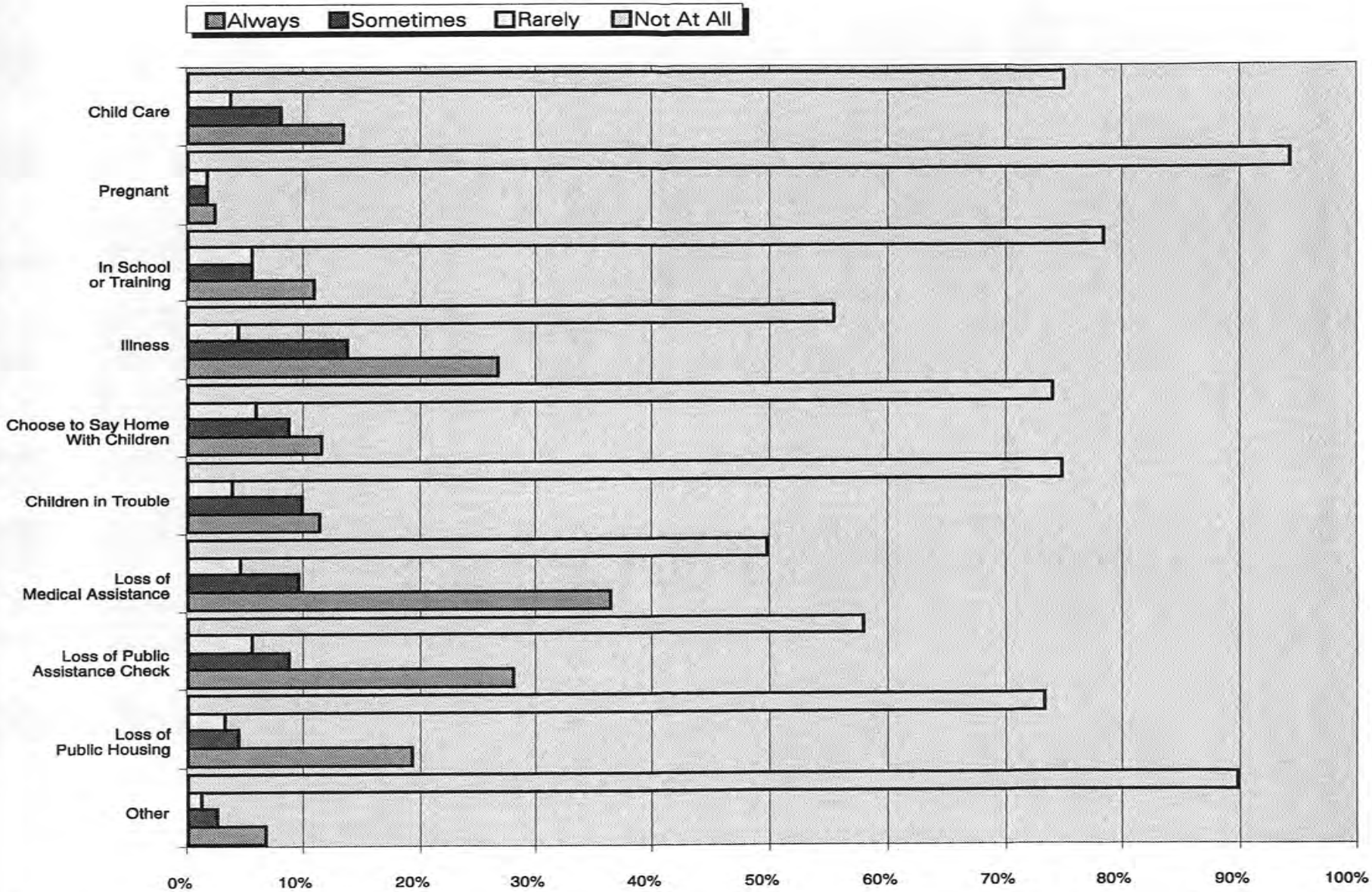
Prepared by Research, Evaluation and Statistics (4/95).

CHART 18a: BARRIERS TO EMPLOYMENT



Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

CHART 18b: BARRIERS TO EMPLOYMENT



Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

SECTION III:

FERTILITY AND PUBLIC ASSISTANCE HISTORY

On average, respondents were 19 years of age when they gave birth to their first child. The majority (74.5%) gave birth to their first child between the ages of 16 and 21. Approximately 11 percent (46) gave birth to their first child at the age of 16, followed by 12.0 percent (48) at the age of 17; 16.3 percent (65) at the age of 18; 14.5 percent (58) at the age of 19; 11.3 percent (45) at the age of 20; and 9.0 percent (36) at the age of 21.

An additional 9 percent (36) gave birth to their first child when they were between the ages of 10 and 15 and 9 percent (35) gave birth between the ages of 25 and 50 (see Table 19). The average number of children living in long-term recipient households was 2.68. Twenty-seven point one percent (118) of the respondents reported only one child living in the household.

TABLE 19: AGE OF LONG-TERM RECIPIENT WHEN FIRST CHILD WAS BORN & AGE FIRST RECEIVED AFDC MONEY PAYMENT

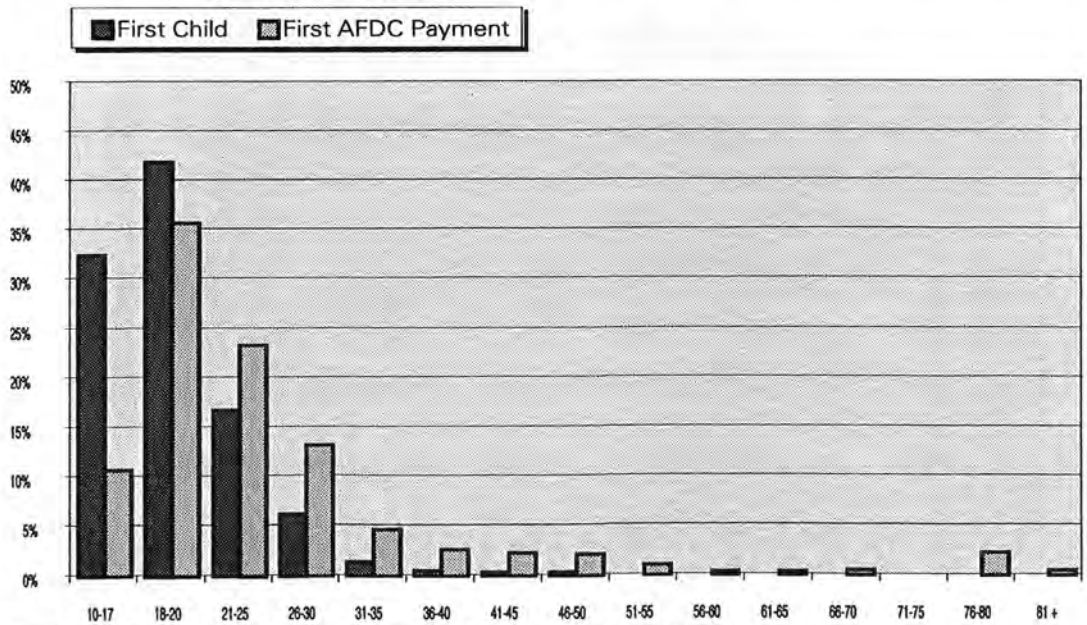
Age in Years	Birth of First Child	Received First AFDC Check
10-17		
Percent	32.5	10.8
Number	130	40
18-20		
Percent	42	35.8
Number	168	133
21-25		
Percent	16.8	23.4
Number	67	87
26-30		
Percent	6.3	13.2
Number	25	49
31-35		
Percent	1.4	4.6
Number	6	17
36-40		
Percent	0.5	2.7
Number	2	10
41-45		
Percent	0.3	2.4
Number	1	9
46-50		
Percent	0.3	2.2
Number	1	8
51-55		
Percent	0	1.1
Number	0	4
56-60		
Percent	0	0.3
Number	0	1
61-65		
Percent	0	0.3
Number	0	1
66-70		
Percent	0	0.5
Number	0	2
71-75		
Percent	0	0
Number	0	0
76-80		
Percent	0	2.4
Number	0	9
81+		
Percent	0	0.5
Number	0	2

Prepared by Research, Evaluation & Statististics Unit (4/95)

Thirty point one percent (131) have two children residing in their household and 18.9 percent (82) have three children in the households. An additional 23.4 percent of the long-term recipients reported between four and 17 children are residing in their households (see Table 20).

When asked "How many of the children living in the household are your own?" 13 percent (55) reported that none of the children are their own. Approximately twenty-six percent (110) indicated that one child living in the household is their own; 25 percent (106) indicated two are their own; and 19.3 percent (82) reported that three are their own. The average number of children living in long-term recipient households who are the payee's own is 2.17. An additional 16.7 percent (71) of the respondents reported that between four and nine of the children are their own.

CHART 19: AGE AT BIRTH OF FIRST CHILD AND RECEIPT OF FIRST AFDC PAYMENT



Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

FACT:

An average of 2.25 children per household are receiving AFDC/SSI benefits.

TABLE 20: NUMBER OF CHILDREN LIVING IN HOUSEHOLD BY RELATIONSHIP TO CARETAKER AND RECIPIENT STATUS

A. Number of Kids Household	None	One	Two	Three	Four	Five	Six	Seven	Eight	Nine+	Average
Percent	0.5	27.1	30.1	18.9	9.9	6.2	3.7	1.8	0.9	0.9	2.68
Number	2	118	131	82	43	27	16	8	4	4	
Own											
Percent	13	25.9	25	19.3	8.3	4.5	1.9	0.9	0.7	0.5	2.172
Number	55	110	106	82	35	19	8	4	3	2	
Someone Else's											
Percent	77.3	10.4	6.1	3.1	1.7	0.7	0.5	0	0	0.2	0.47
Number	327	44	26	13	7	3	2	0	0	1	
B. Number of Kids Receiving AFDC/SSI											
Percent	4	35	26.6	17.5	7.5	5.1	2.3	0.9	0.7	0.2	2.248
Number	17	150	114	75	32	22	10	4	3	1	
Own											
Percent	16.3	30.5	22.3	17	7.2	3.6	1.7	0.5	0.7	0.2	1.942
Number	68	127	93	71	30	15	7	2	3	1	
Someone Else's											
Percent	81.3	10.1	4.6	2.4	0.7	0.5	0.2	0	0	0.2	0.353
Number	339	42	19	10	3	2	1	0	0	1	
C. Number of Kids Not Receiving AFDC/SSI											
Percent	79.8	13.4	4	1.4	1.2	0	0.2	0	0	0	0.317
Number	340	57	17	6	5	0	1	0	0	0	
Own											
Percent	85.5	11.4	2.1	0.5	0.5	0	0	0	0	0	0.19
Number	360	48	9	2	2	0	0	0	0	0	
Someone Else's											
Percent	93.3	3.8	1.2	0.7	0.5	0	0.2	0.2	0	0	0.133
Number	393	16	5	3	2	1	1	1	0	0	

Some numbers may not equal 100% due to inconsistent reporting.

Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

SECTION III

CHART 20A-C: CHILDREN LIVING IN HOUSEHOLD[1] BY RELATIONSHIP TO CARETAKER & RECIPIENT STATUS

Chart 20A
CHILDREN LIVING IN HOUSEHOLD

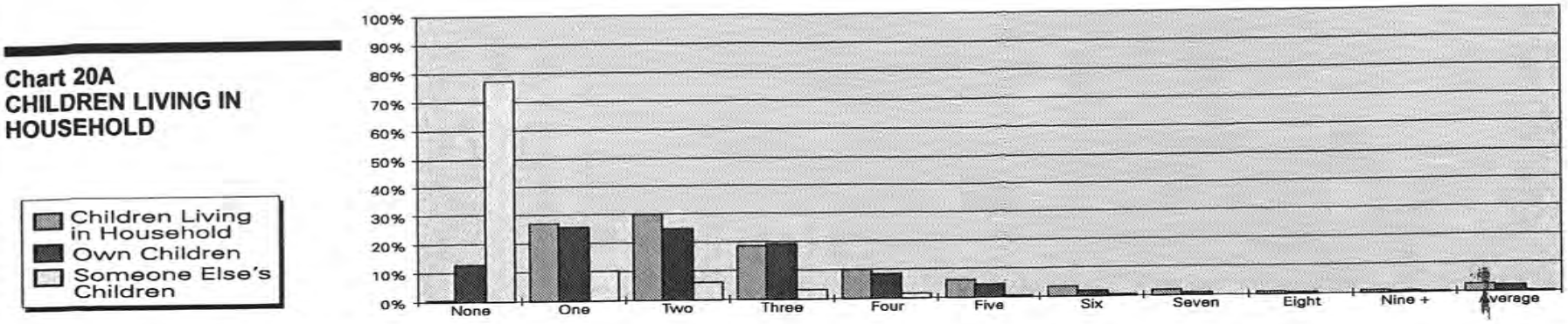


Chart 20B
CHILDREN RECEIVING AFDC/SSI

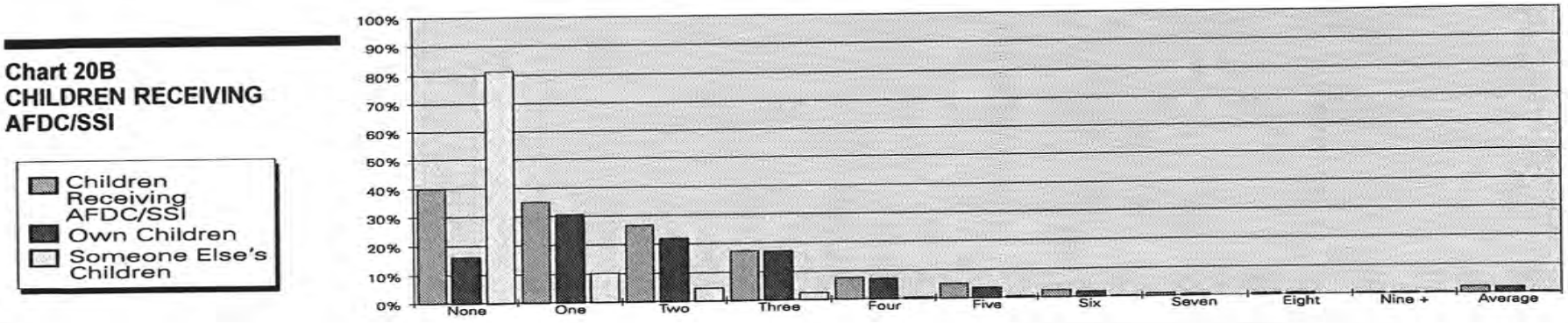


Chart 20C
CHILDREN NOT RECEIVING AFDC/SSI

Total number of children will not add up because of inconsistent reporting.
Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

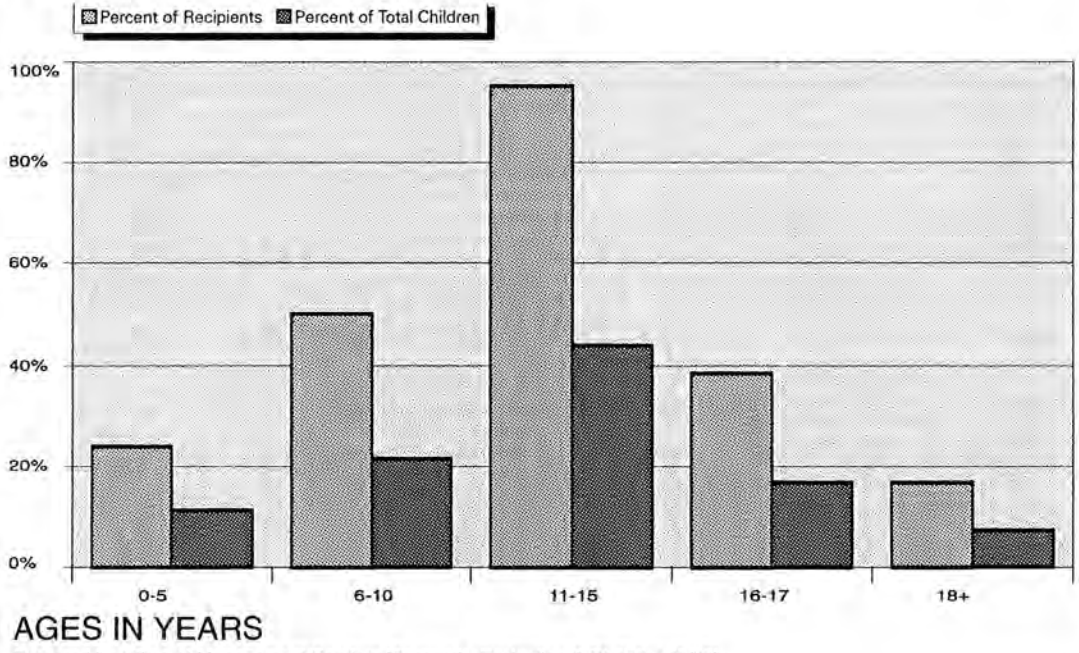
TABLE 21: REPORTED AGES OF LONG-TERM AFDC RECIPIENT'S CHILDREN

Age of Children	Total Number of Children	Percent of Recipients	Percent of Total Children
0-5	105	23.9	10.9
6-10	209	49.8	21.7
11-15	420	95.5	43.6
16-17	159	37.9	16.4
18+	71	16.9	7.4

Forty-four (10.4%) of the respondents indicated they have one child living in their households who is not their own. Twenty-six (6.1%) reported caring for two children in their households who are not their own. An additional 6.1% (26) reported between 3 and 9 children living in their households are not their own (see Table 20). These numbers represent an estimated 102 (23%) respondents who are caring for 199 (est.) children who are not their own, which is similar to the demographic trends observed earlier.

An average of 2.25 children per household are receiving AFDC/SSI benefits. Thirty-five percent (150) of the respondents indicated that one child in the household is receiving benefits. One hundred and fourteen (26.6%) report two children in the household receive benefits with an additional 17.5 percent (75) reporting three children receive benefits. 16.8 percent (72) reported between four and nine children in the household receive benefits. In regard to their own children, 30.5 percent (127) reported having one child who receives AFDC/SSI.

CHART 21: AGES OF CHILDREN



Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

TABLE 22: EXPECTATION OF USE AND USAGE PATTERNS OF AFDC BY CHILDREN OF LONG-TERM AFDC RECIPIENTS

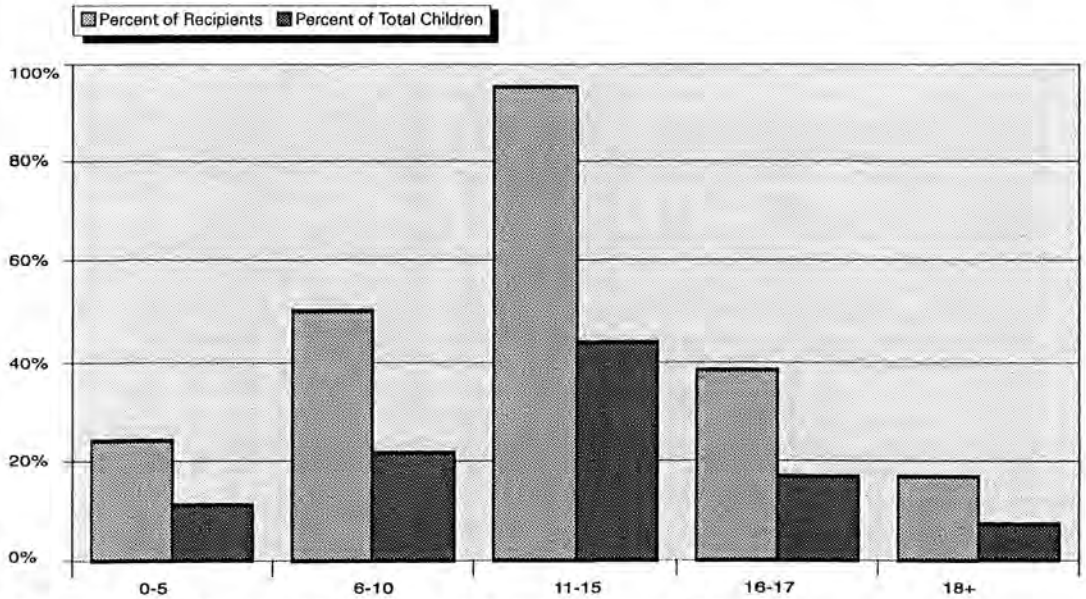
Children's AFDC Usage	Yes	Possibly	Likely	No
Expect children be on AFDC?				
Percent	8.3	17.3	33	39
Number	34	71	145	160
Any children EVER received check in their own name?				
Percent	19.2	N/A	N/A	80.8
Number	83	N/A	N/A	349
Any children CURRENTLY receiving check in their own name?				
Percent	14.1	N/A	N/A	85.9
Number	60	N/A	N/A	365

Prepared by:
Office of Management Services/Research, Evaluation & Statistics (5/95)

Ninety-three of the respondents (22.3%) reported receiving benefits for two children and 17% (71) reported benefits for three children. Sixty-eight of the respondents (16.3%) reported they are not receiving benefits for any of their own children. Fifty-eight (13.9%) of the respondents reported receiving benefits for between four and nine of their own children.

Eighty-one percent (339) reported they are not receiving benefits for anyone else's children in the household. However, 10.1% (42) reported receiving AFDC/SSI for one child in the household who is not their own. Nineteen (4.6%) reported receiving benefits for two children in the household who are not their own. Ten (2.4%) reported receiving benefits for three children in the household who are not their own. Additionally, seven respondents (1.6%) reported receiving benefits for between four and nine children living in the household who are not their own.

CHART 22: EXPECTED USE AND USAGE PATTERN OF AFDC BY CHILDREN



Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

FACT:

The average number of times a current long-term AFDC recipient has received benefits including their current active case, is twice.

Over 95% (95.5; 420) of the respondents' children are between the ages of 11 and 15 followed by children between the ages of six and ten (49.8%; 209) (see Table 21). Approximately 38% percent (159) have children between the ages of 16 and 17 while an additional 16.9% (71) of the respondents have children 18 years of age or older. A little over twenty-three percent (23.9%; 105) reported having children between the ages of 0 - 5 years of age. On average, 2.06 children were born per recipient while on AFDC. However, 25.2% (99) of the respondent recipients have not given birth to a child while receiving AFDC and 17.8% (70) have given birth to only one child while on AFDC. Twenty-six percent (102) have given birth to two children while receiving AFDC benefits. An additional 31.0% (122) have given birth to three or more children while receiving AFDC benefits.

The average age at which long-term recipients received their first AFDC check was 25.65 years with 62.6% percent (233) of the respondents receiving their first check between the ages of 18 and 26. A little over ten percent (40) of the respondents reported receiving their first check between the ages of 14 and 17 (see Table 19). It should be noted that at the age of 30 there appears to be another large increase in the percentage of persons receiving their first check as well as a jump that occurs at the age of 77. The average number of times a current long-term AFDC recipient has received benefits including their current active case, is twice.

The largest group of respondents (55.6%; 219) indicated this current episode is the one and only time that they have received AFDC benefits. Approximately 22 percent (21.6%; 85) have received AFDC benefits on two occasions including their current case followed by 9.1% (36) receiving between 3 - 5 occasions, and 13.7 percent (54) receiving on 6 or more occasions.

Further, the majority (71.4%; 300) of respondents reported their families did not receive AFDC or Welfare when they were children. However, it should be noted that 28.6% (120) of the survey respondents indicated their families did receive AFDC when they were children.

TABLE 23A: SERVICES AND REFERRALS PROVIDED BY DHS FOR LONG-TERM AFDC RECIPIENTS

Services	Number Received	Percent
Medical Treatment	373	90.3
Preventive Medical	241	58.4
Social/Developmental Problems	50	12.1
Alcohol & Drug Treatment/Counseling	9	2.2
Alcohol & Drug Prevention	6	1.5
Obtaining Adequate Housing	69	16.7
Maintain/Retain Adequate Housing	54	13.1
Employment Training	126	30.5
Job Search	136	32.9
Day Care/Children	118	28.6
Day Care/Adult	6	1.5
Financial Aid-Other Agencies	68	16.5
Adult Basic Education	91	22
Formal Education	22	5.3
Special Education	18	4.4
Pregnancy Related Services	70	16.9

Prepared by:
Office of Management Services/Research, Evaluation & Statistics (5/95)

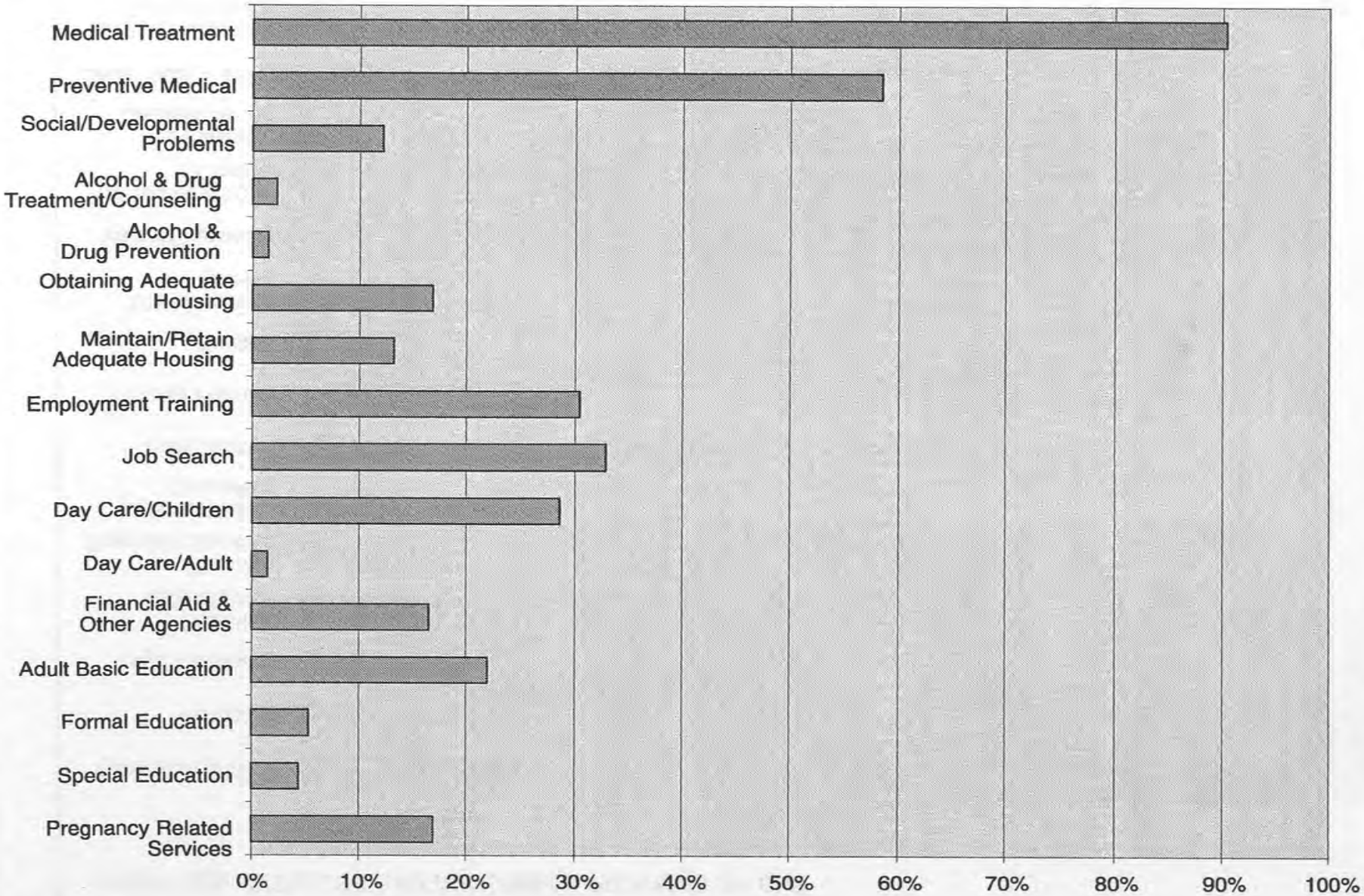
The majority (72%; 305) of respondents stated it is not likely their children will ever receive AFDC in their adult lives. Over 80 percent (80.8%; 349) of the study respondents reported their adult children have never received their own AFDC checks and are not currently receiving an AFDC check (85.9%; 365). However, 25.6% (105) of the respondents believe it is possible if not highly likely their children will receive AFDC checks as adults.

Further, 19.2% (83) indicated their adult children have received their own AFDC checks in the past and 14.1% (60) indicate they have adult children who are currently receiving AFDC benefits (see Table 22). These findings suggest that between 20 and 30% of long-term AFDC recipient children are at risk for developing intergenerational dependence.

The majority of respondents have received medical treatment services (90.3%; 373) and preventive medical services (58.4%; 241). Approximately one-third of long-term respondents have utilized Job Search (32.9%; 136), Employment training (30.5%, 126), and Day Care (28.6%; 118) services. Adult Basic Education services have been provided to 22% (91) of the survey respondents. Services provided to less than 20% of the long-term recipient population include: orientation to work; pregnancy-related services, obtaining/maintaining/retaining adequate housing; obtaining financial aid from other agencies; family planning; obtaining child support; aid in coping with social/developmental problems; nutrition; individual/group counseling; transportation; psychiatric services; formal education; legal assistance; parenting classes/training; special education; social skills training; budgeting; stress management; alcohol and drug treatment/counseling; child discipline classes/training; alcohol and drug prevention services; adult day care; conflict resolution classes/training; and marital counseling (see Table 23a-b).

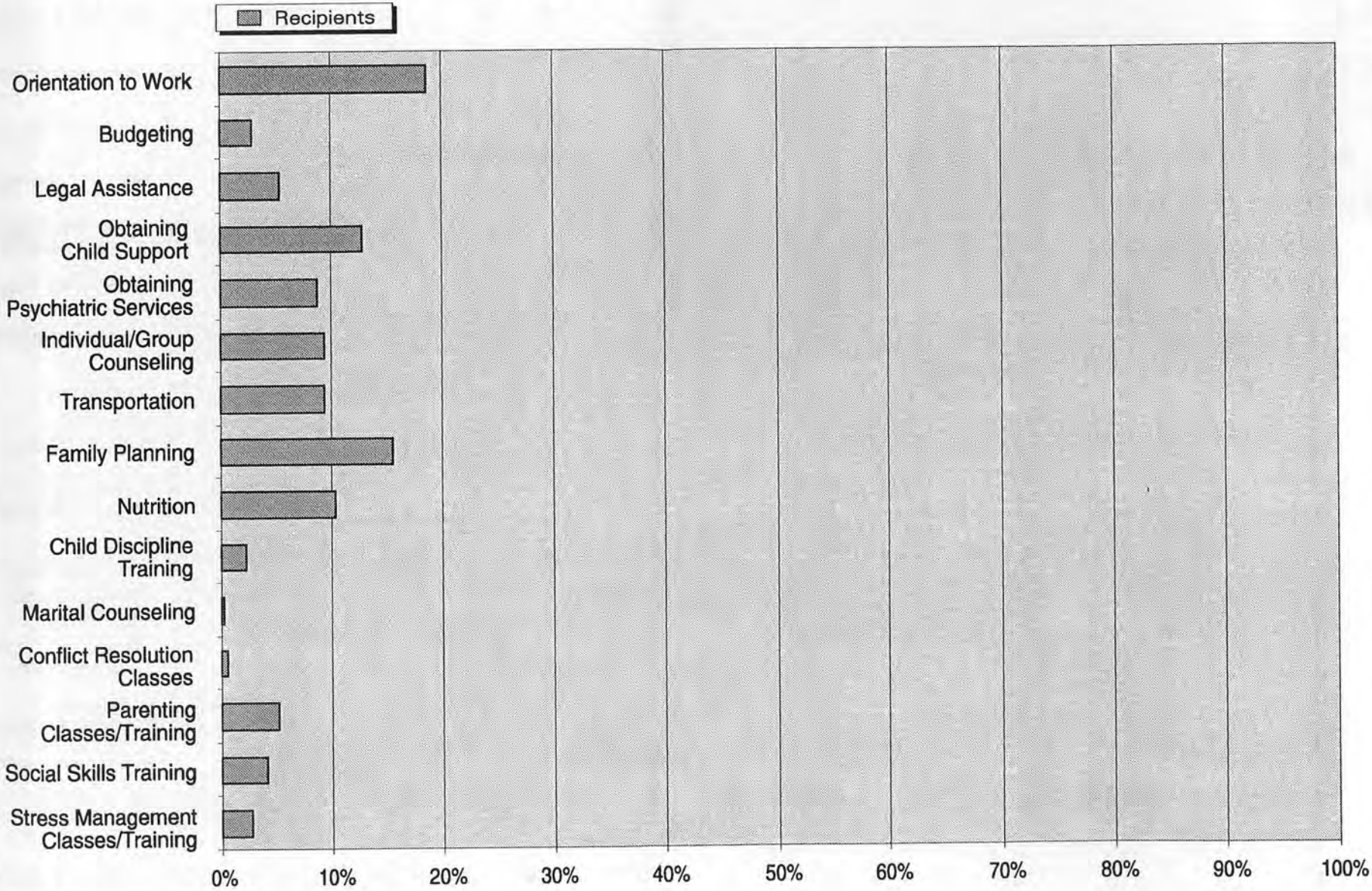
Over the last year, respondents were more likely to receive help with their families' needs from government programs (53.8%), adult children (47.1%) and parents (44.1%). They were least likely to receive help from co-workers (12.5%), professionals (17.6%) and neighbors (20.4%). It should also be noted that less than one-third of the population received help from churches (32.1%), other relatives (32.9%), friends (32.7%) or their spouse/partner (20.7%). These findings are important in that some of the national-level welfare reform measures call upon and/or depend upon private businesses, communities and religious organizations to fill the gap.

CHART 23A: SERVICES AND REFERRALS PROVIDED BY DHS



Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

CHART 23B: SERVICES AND REFERRALS PROVIDED BY DHS



Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

TABLE 23B: SERVICES AND REFERRALS PROVIDED BY DHS FOR LONG-TERM AFDC RECIPIENTS

Services	Number Received	Percent
Orientation to Work	77	18.6
Budgeting	12	2.9
Legal Assistance	22	5.3
Transportation	39	9.4
Family Planning	64	15.5
Nutrition	43	10.4
Child Discipline Training	9	2.2
Marital Counseling	1	0.2
Conflict Resolution Classes	2	0.5
Parenting Classes/Training	21	5.1
Social Skills Training	17	4.1
Stress Management Classes/Training	11	2.7

Prepared by:
Office of Management Services/Research, Evaluation & Statistics (5/95)

Survey respondents were given a list of common reasons why people go on AFDC. They were then asked to indicate how true each of the items was to their situation. The top two reasons given by study respondents were "pregnancy or care of a newborn" (57.5%; 222) and "unable to find a job" (51.7%; 201) followed by "separation/divorce" (41.7%; 163);"illness" (39.1%; 150); "personal problems" (37.9%, 148); "permanent disability" (36.9%; 142); "child care expenses" (36.8%; 141); "low wages" (36.1%; 139); "problems with child support" (31.4%; 119); "family illness" (29.3%; 113); and "loss of job" (28.3%; 108). Other reasons given by less than 7 percent of the respondents included "alcohol and drug abuse" (6.6%, 25); "lack of training and education" (0.9%, 4); "lack of transportation" (0.5%, 2) and "age" (0.5%; 2).

The major reasons identified by study respondents for remaining on public assistance were "illness" (23%; 101); "inability to find employment" (15.9%, 70); "lack of education and training" (14.1%; 62); and "disability" (12.7%; 56).

Respondents were asked to rank 12 services according to how useful they were in helping them get off AFDC. They scored the services from 1 to 11, with 1 being the most useful service and 11 being the least useful (see Table 24). Overall, respondents did not indicate any of the services listed were "most useful."

The respondents indicated seven of the services listed would be "useful": job training; assistance in finding a job; more education; better transportation; health insurance; assistance in getting child support; and more affordable housing.

Four survey items were identified as being the "least useful": Day Care; marriage to someone for support; help from family and friends; and doing nothing. However, it should be noted the majority of respondents reported they would need to continue to receive Day Care assistance after they find employment.

The respondents further indicated they would still need to receive day care assistance for an average of four to eight months after their AFDC cases were closed due to employment. However, a large number of respondents (32.8%; 117) indicated they would still need to receive day care assistance for 19 months or more after their AFDC cases were closed.

TABLE 24: USEFULNESS RANKING OF PROPOSED AFDC RECIPIENT SERVICES

Services	Average Ranking *	Descriptive Ranking **
Job Training	5.811	Useful
Help Finding a Job	6.445	Useful
More Education	7.155	Useful
Better Transportation	7.427	Useful
Health Insurance	7.695	Useful
Help Getting Child Support	8.161	Useful
Affordable Housing	8.314	Useful
Day Care	9.143	Least Useful
Marriage to Someone with Resources	9.298	Least Useful
Help from Family and Friends	9.618	Least Useful
Other	10.145	Least Useful
Nothing	10.320	Least Useful
Continued Support after Employment	10.886	Least Useful
Counseling/Change in Attitude	10.955	Least Useful

** Scores of "Most Useful" would require an average ranking of 1.000 to 3.500.*

*** A ranking "Least Useful" indicates that these are items are considered less useful than other items."*

Prepared by:

Office of Management Services/Research, Evaluation & Statistics (5/95)

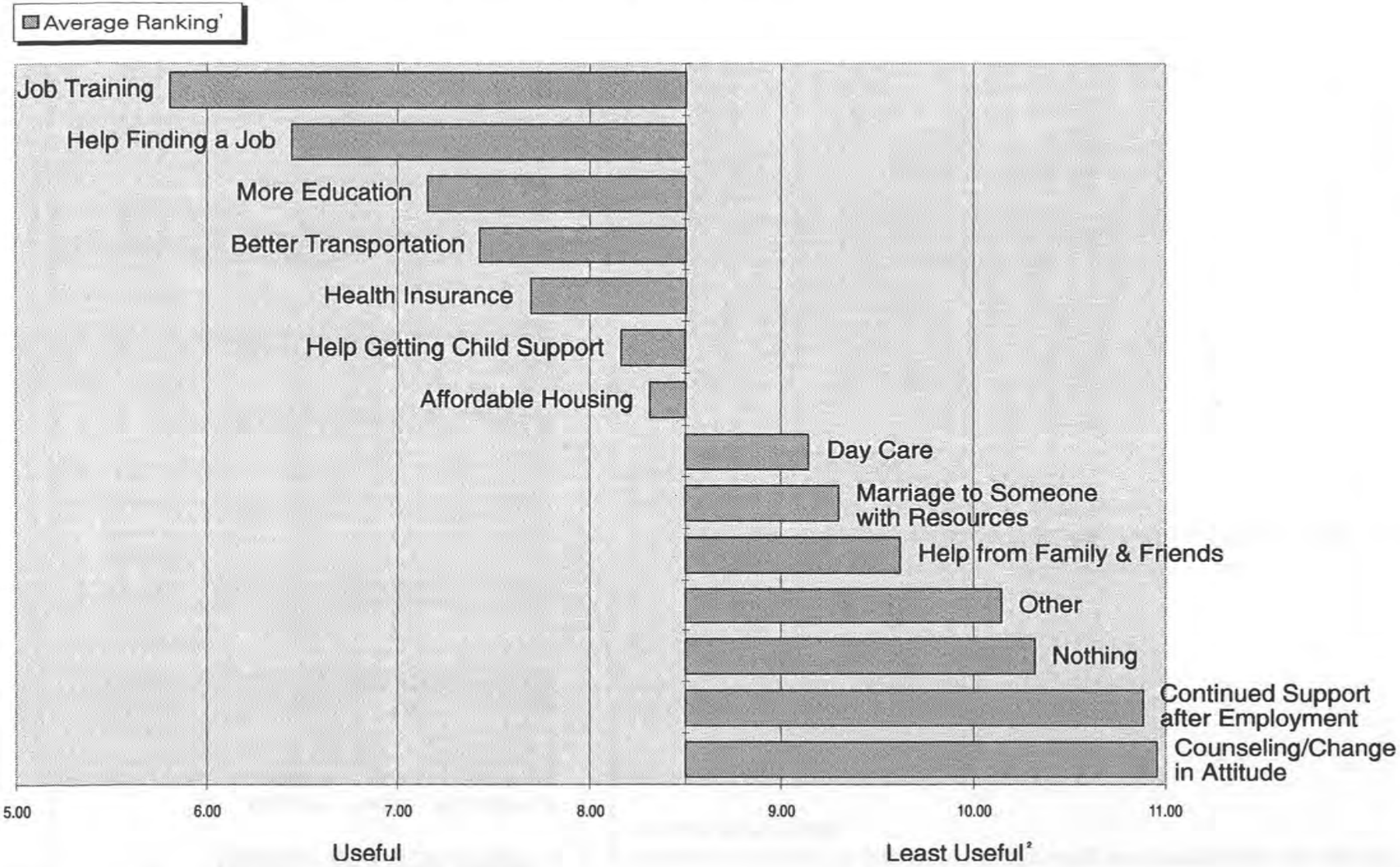
An additional 43.7 percent (156) indicated they would not need to receive day care assistance after their AFDC cases were closed. Overwhelmingly, respondents (64.5%; 251) felt that they would need their AFDC medical benefits to continue for more than 19 months after their AFDC cases were closed. Only ten (2.6%) respondents indicated they would not need continued medical assistance once their cases were closed due to employment.

Overall respondents felt they would need to continue receiving their AFDC money payments for an average of 9 - 12 months once their cases were closed due to employment. Twenty-nine point three percent (101) felt they would need to continue receiving their full assistance checks for more than 19 months after their cases were closed due to employment.

Only 9.3 percent (32) of the participants indicated they would no longer need a public assistance payment once they were employed (see Table 25). These findings are not surprising in light of respondents' future employment aspirations. The type of employment that is being sought would only provide minimal income with little or no benefits. Therefore, it would be fiscally necessary for these kinds of benefits to continue.

The majority (75.6%; 270) of survey respondents feel they will be off AFDC in five years. Almost one-half of the respondents feel that within the next five years, they will have found a job (46.5%; 166); own a car (42.9%;153); and/or be attending a school or training program (41.5%;148). Approximately one-third of the respondents feel they will be moving to a better residence (38.4%; 137) and improving family relationships (36.4%; 130) within the next five years.

CHART 24: USEFULNESS RANKING OF PROPOSED SERVICES



[1] Scores of Most Useful would require an average ranking of 1,000 to 3,500

[2] A ranking "Least Useful" indicates that these are items that are considered less useful than other items.

Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

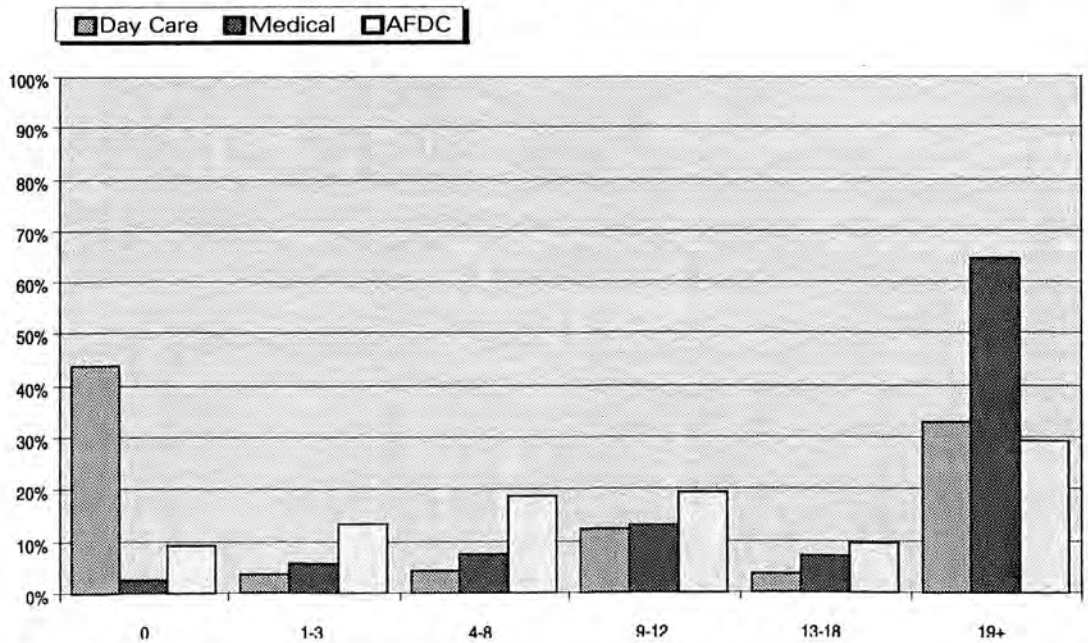
TABLE 25: PERCEPTIONS OF CONTINUED NEED FOR DAY CARE, MEDICAL AND AFDC BENEFITS

Length of Time	Day Care Assistance	Medical Card	AFDC Benefits Unaffected
0 Months			
Percent	43.7	2.6	9.3
Number	156	10	32
1 - 3 Months			
Percent	3.6	5.7	13.6
Number	13	22	47
4 - 8 Months			
Percent	4.2	7.5	18.8
Number	15	29	65
9 - 12 MonthsP			
Percent	12.3	12.9	19.4
Number	44	50	67
13 - 18 Months			
Percent	3.4	6.9	9.6
Number	12	27	33
More Than 18 Months			
Percent	32.8	64.5	29.3
Number	117	251	101
Average Response	***4 - 8 Months***	***13 - 18 Months***	***9 - 12 Months***

Prepared by:
Office of Management Services/Research, Evaluation & Statistics (5/95)

Approximately, 24 percent (87) believe they will have found a better job and 21.8 percent will be married to someone who will support them within the next five years (see Table 26). The age distribution of the respondents' children indicates that within five years many long-term recipients will be off AFDC due to loss of eligibility.

CHART 25: PERCEPTION OF CONTINUED NEED FOR DAY CARE, MEDICAL AND AFDC BENEFITS



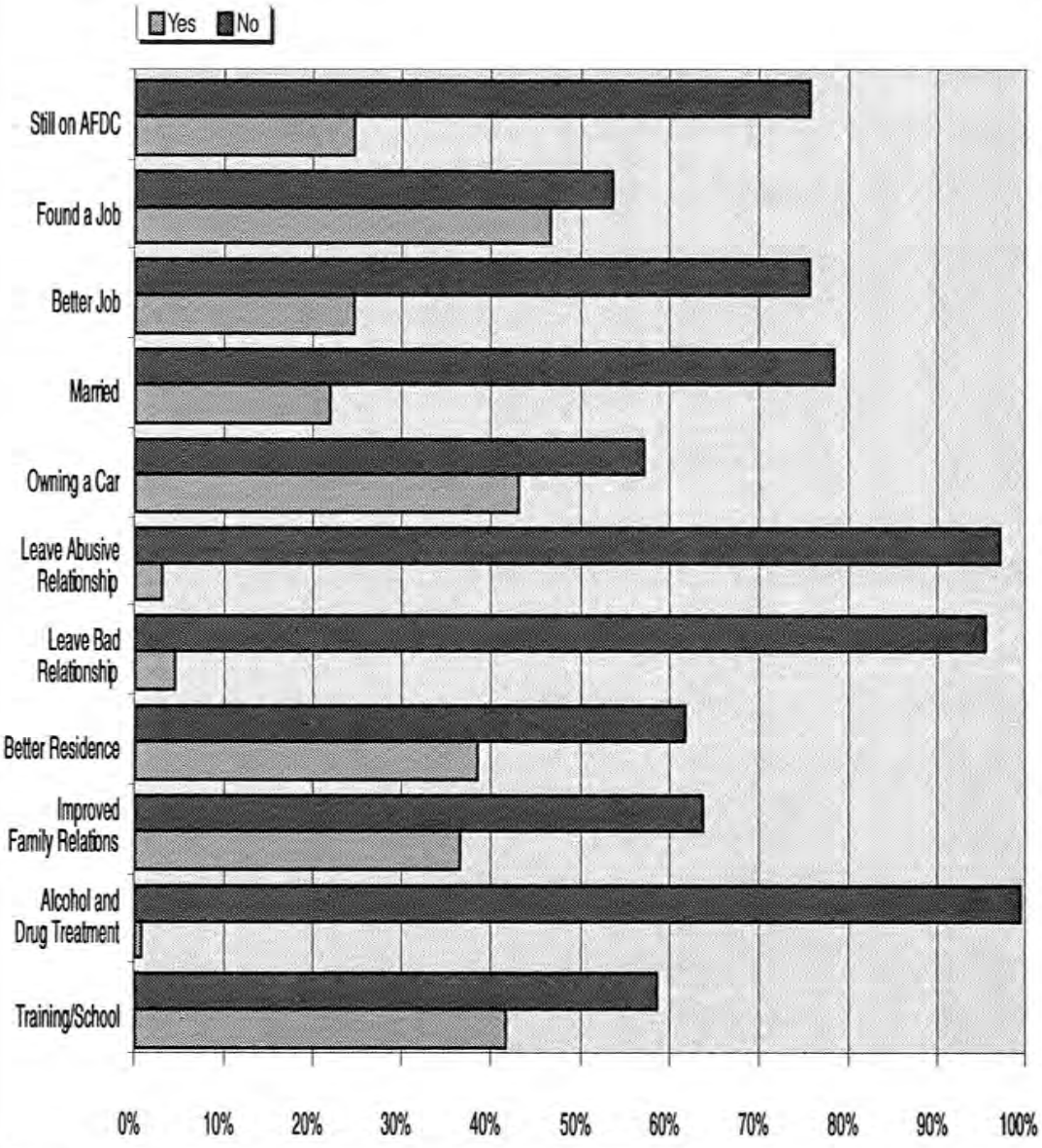
Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

TABLE 26: FIVE YEAR VISION FOR LONG-TERM AFDC RECIPIENTS

Vision	Yes	No
Still on AFDC		
Percent	24.4	75.6
Number	87	270
Found a Job		
Percent	46.5	53.5
Number	166	191
Better Job		
Percent	24.4	75.6
Number	87	270
Married		
Percent	21.8	78.2
Number	78	279
Owning a Car		
Percent	42.9	57.1
Number	153	204
Leave Abusive Relationship		
Percent	3.1	96.9
Number	11	346
Leave Bad Relationship		
Percent	4.5	95.4
Number	16	341
Better Residence		
Percent	38.4	61.6
Number	137	220
Improved Family Relations		
Percent	36.4	63.6
Number	130	227
Alcohol and Drug Treatment		
Percent	0.8	99.2
Number	3	354
Training/School		
Percent	41.5	58.5
Number	148	209

Prepared by:
Office of Management Services/Research, Evaluation & Statistics (5/95)

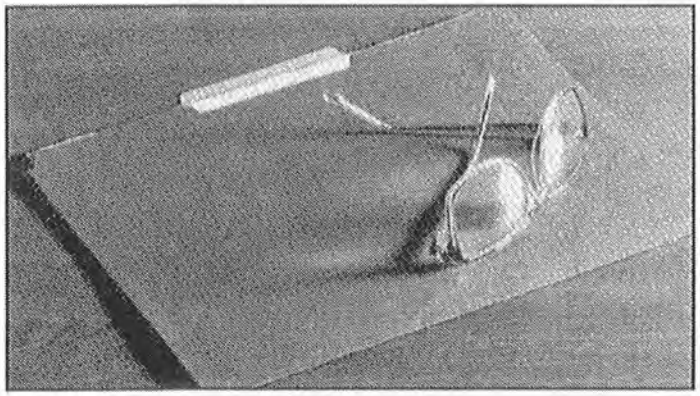
CHART 26: PERCEPTION OF CONTINUED NEED FOR DAY CARE, MEDICAL AND AFDC BENEFITS



Prepared by Office of Management Services/Research, Evaluation & Statistics (5/95)

SECTION III

SECTION IV: GENERAL MENTAL HEALTH



In this section, five areas related to general mental health are examined: Spousal Abuse, Childhood Physical Abuse, Childhood Sexual Abuse, Mental Illness, and Alcohol and Drug Addiction. These areas were investigated to identify any specialized services long-term recipients may need to increase their workforce participation.

According to a national study conducted by M. Straus and R. Gelles (1986), it is estimated that 5.8% of all marital relationships are abusive at a severe level. More specifically, it is estimated that 3.0% of all husbands severely physically abuse their wives. This is comparable to the findings in this study. In another national study of marital dependence and violence, it was found that severe violence directed toward women is associated with economic dependence as measured by the victim's employment status, presence of young children, and whether the husband earned 75 percent or more of the family income (Kalmuss & Straus, 1982).

Other studies have found that one-third to one-half of homeless women are fleeing domestic violence (State Justice Institute Conference, 1993). In this study, two survey items were used as indicators of recipients' involvement in abusive relations. The first item asked for participant response to the statement, "In 5 years I can see myself getting out of an abusive relationship with my partner."

Eleven (2.5%) of the respondents agreed with this statement. The second item asked respondents, "If you are married, but currently not living with your spouse, how much do each of the following reasons explain why?" Two (4.6%) respondents wrote in that their spouses were physically abusive (these two respondents are independent of the 11 who agreed with the first abuse item). Therefore, 13 (2.95%) respondents indicated they are currently involved with abusive partners.

TABLE 27: ESTIMATES OF CHILDHOOD PHYSICAL AND SEXUAL ABUSE FOR LONG-TERM AFDC RECIPIENT POPULATION

Type of Abuse	Number of Recipients	Percent
Minor Violence Acts:		
Threw Something (1)	77	22.2
Pushed/Grabbed/Shoved (2)	88	25.1
Slapped (3)	113	32.4
Spanked (4)	284	76.5
Severe Violence Acts:		
Kicked/Bit/Hit with Fist (5)	44	10
Hit/Tried to hit w/Something (6)	82	22.6
Beat Up (7)	29	8.3
Threatened w/Knife or Gun (8)	18	5
Used Knife or Gun (9)	11	3.1
Violence Indexes:		
Overall Violence (1-9)	316	84.9
Severe Violence (5-9)	98	27.3
Very Severe Violence (5,7,9)	53	15.1
Sexual Abuse	94	22.3

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In addition, Straus and Gelles (1986) estimated the occurrence of child abuse using a violence severity index. The same violence severity index was used in this study. Due to complications arising out of the acceptance of corporal punishment (spanking), only the Very Severe Index is used to create national estimates as well as the estimates produced in this study. Straus and Gelles estimate that approximately 3.6 percent of all children in the nation are victims of very severe forms of violence (i.e. being kicked, bitten, or hit with a fist; beaten; or having a knife or gun used on them). In this study, fifty-three (15.1%) respondents indicated they had been physically abused at the very severe level as children by their parents (see Table 27).

CHART 27: CHILDHOOD PHYSICAL AND SEXUAL ABUSE

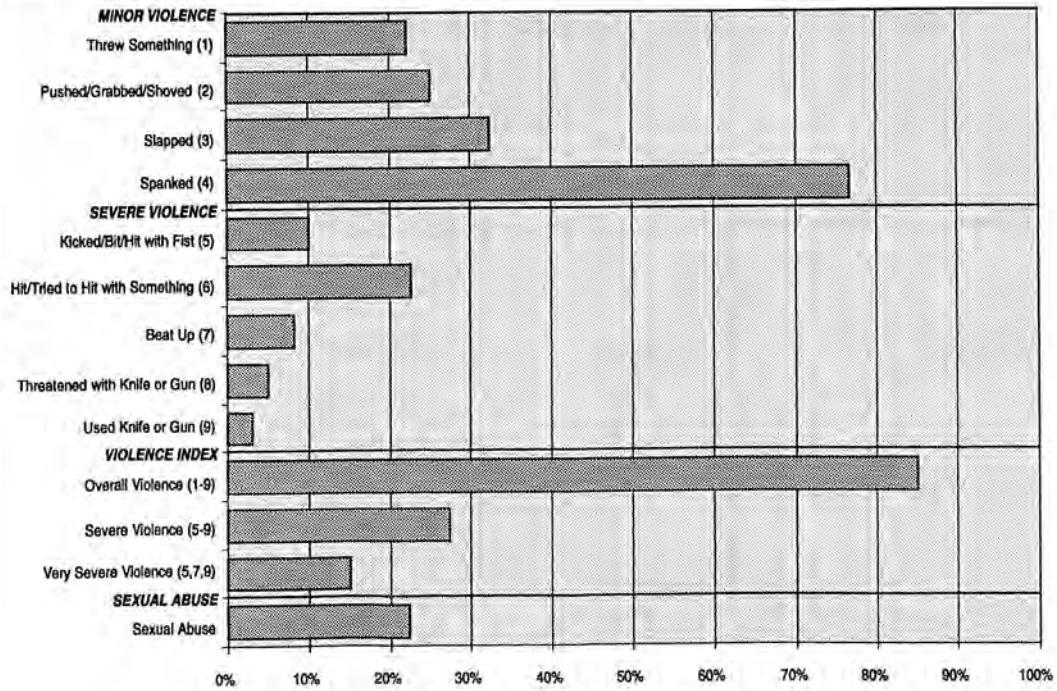

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TABLE 28: MENTAL HEALTH DIAGNOSES REPORTED BY LONG-TERM AFDC RECIPIENTS

Diagnosis	Percent Who Sought Help	Percent Overall Population
Depression	54.7 (41)	9.3 (41)
Chemical Addiction	1.3 (1)	0.2 (1)
Bi-Polar/Manic Depression	5.3 (4)	0.9 (4)
General Mental Health	2.7 (2)	0.5 (2)
Neurosis	6.7 (5)	1.1 (5)
Anxiety	6.7 (5)	1.1 (5)
Schizophrenia	6.7 (5)	1.1 (5)
Chronic Pain	1.3 (1)	0.2 (1)
Post Traumatic Stress Disorder	1.3 (1)	0.2 (1)
Unknown/Forgotten	13.3 (10)	2.3 (10)

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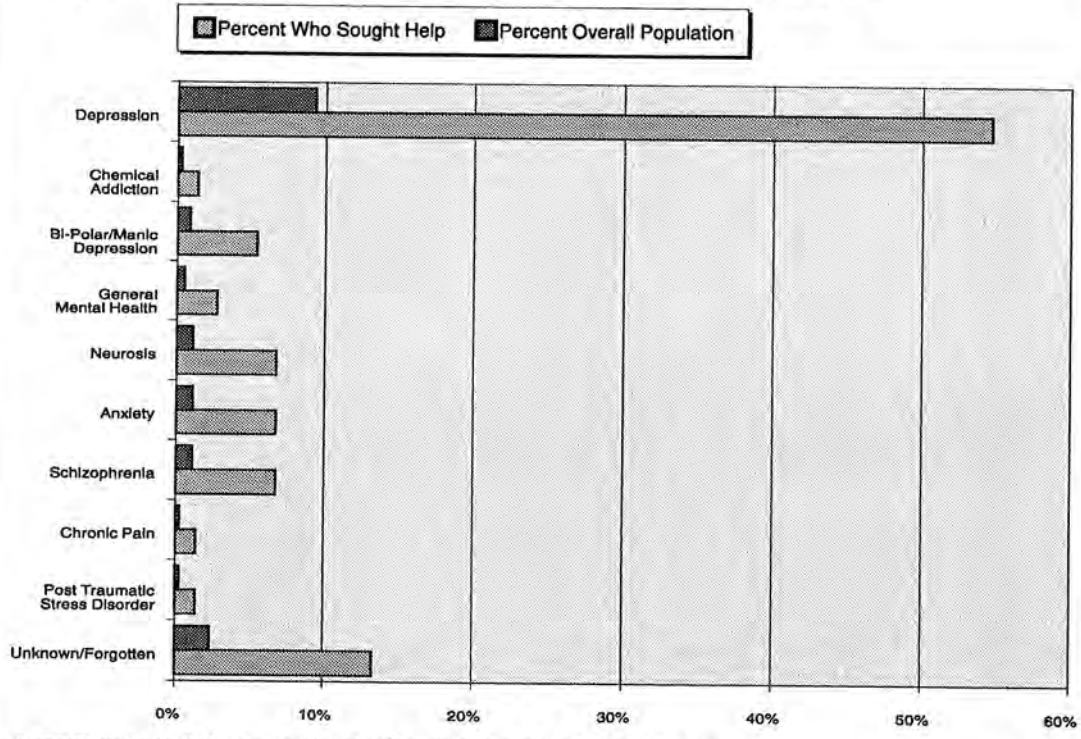
The occurrence of very severe physical abuse in the long-term AFDC population is higher than national estimates for the general population. Survey participants were also asked "When you were growing up, were you ever sexually abused (by this we mean: unwanted touching, sexual assault, or rape) by a family member or others?" Ninety-four (22.3%) of the survey respondents reported they were sexually assaulted as children.

The average age at which the sexual abuse first occurred was 9.9 years of age with 48.4% (44) of the abuse beginning between the ages of 1 - 9 and 51.6% (50) beginning at the age of 10 or later. Further analysis reveals that 25 of these individuals were both physically abused and sexually abused as children. Overall, 122 long-term AFDC recipients (33.7%) were victims of child physical and sexual abuse.

CHART 28: MENTAL HEALTH DIAGNOSES REPORTED



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SECTION IV

TABLE 29: PRESCRIBED MEDICATIONS BEING TAKEN FOR MENTAL HEALTH RELATED PROBLEMS BY LONG-TERM AFDC RECIPIENTS

Medication	Number of Recipients	Percent of Diagnosis Population*
Narcotic Addiction Maintenance	1	1.1
Methadone	1	1.1
Antipsychotics	20	21.3
Haldol	2	2.1
Thorazene	10	10.6
Doxepin/Sinequan	4	4.3
Fluphenazine/Prolixin	4	4.3
Lithium	1	1.1
Anxiolytic	13	13.8
Valium	3	3.2
Xanax	5	5.3
Tranxene	1	1.1
Vistaril	1	1.1
General Tranquilizer	3	3.2
Anti-Depressants	28	29.8
Paxil	5	5.3
Zoloft	1	1.1
Pamelor	1	1.1
Prozac	11	11.7
Amitreptylene/Elavil	8	8.5
General Antidepressant	2	2.1
Antiepileptic	2	2.1
Dilantin	2	2.1
Unknown	4	4.3
No Medications	6	6.4

** May not add to 100%, more than one type of medication possible per respondent.*

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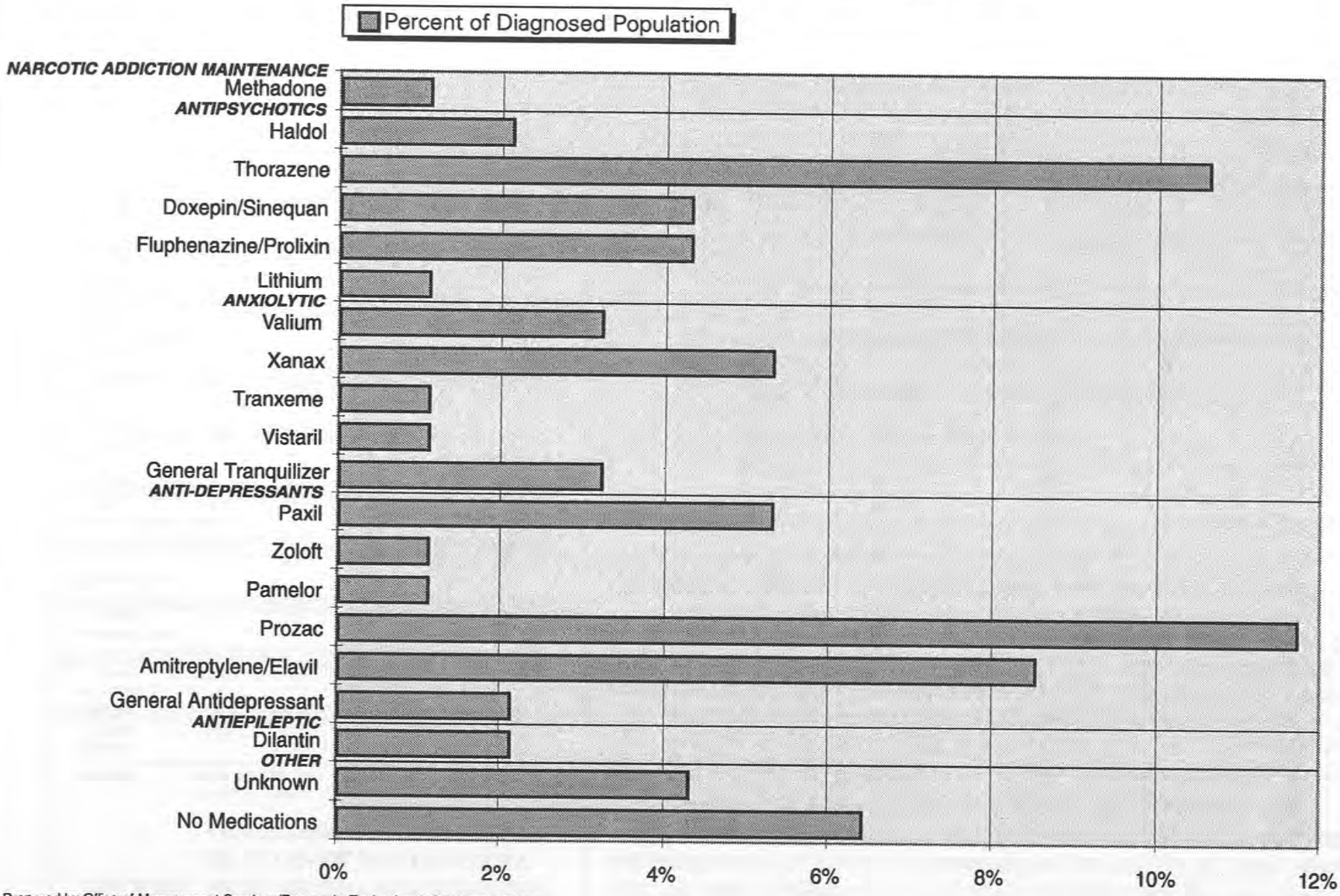
Twenty-two (5.2%) of the respondents reported they were removed from their parents' or guardians' homes by Child Welfare, police, sheriff, or by order of the court. These findings suggest that 33% of the long-term AFDC recipient population may need therapeutic counseling or psychiatric treatment to increase their employability. The relationship between child abuse and long-term AFDC recipiency needs to be further researched to determine if there is a causal link between the occurrence of very severe levels of child abuse and later AFDC recipiency.

Almost 39% (160) of the respondents were concerned at some time that they might have a problem such as Depression, Schizophrenia, Neuroses, Manic Depressive Disorder, etc. Ninety-four (23.4%) of the respondents sought professional help for these problems between 1959 and 1994. Of those who sought professional help, 26.5% (25) did so in 1994. Primary diagnoses include Depression (54.7%; 41); Neuroses (6.7%; 5); Anxiety (6.7%; 5); Schizophrenia (6.7%; 5); Bipolar/Manic Depressive Disorder (5.3%; 4); General Mental Health problems (2.7%; 2); Addiction (1.3%; 1); Chronic Pain (1.3%; 1); Post Traumatic Stress Disorder (1.3%; 1) and Unknown/forgotten (13.3%; 10) (see Table 28).

Additionally, 21 percent of these respondents reported a dual diagnosis. Approximately 65 percent (62) of the respondents who sought professional help reported they are currently on medication with 31.5% (17) taking two medications and 9.2% (5) taking three medications. Anti-depressants [(29.8%, 28): Paxil, Zoloft, Pamelor, Prozac, Elavil/Amitriptyline, and general anti-depressants] represent the largest group of medications being taken by the respondents followed by Antipsychotic [(21.3%, 20) Haldol, Thorazine, Doxepin/Sinequan, Fluphenazine/Prolixin, and Lithium]; Anxiolytics [(13.8%; 13): Valium, Xanax, Tranxene, Vistaril, and general tranquilizers)]; Antiepileptics (2.1%; 2: Dilantin); Narcotic Addiction Maintenance (1.1%; 1: Methadone) and Unknown/Forgotten (4.3%; 4) (see Table 29).

Further, twenty-six respondents (6.2%) reported they have been committed to a mental institution at least once between 1968 and 1994. A little over 10% (45) of the respondents reported they have attempted suicide at some time between 1965 and 1994. Six (24%) of the respondents who have attempted suicide did so between 1990 and 1994.

CHART 29: PRESCRIBED MEDICATIONS FOR MENTAL HEALTH RELATED PROBLEMS



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SECTION IV

TABLE 30: MOST RECENT REPORTED USE OF ALCOHOL AND DRUGS BY LONG-TERM AFDC RECIPIENTS

Substance	Within Past Month	Within Past Year	WithinPast 3 Years	3 Years or More	Never Used
Alcohol					
Percent	12.9	8.2	3.2	23.7	52.1
Number	49	31	12	90	198
Marijuana					
Percent	2.4	3	1.9	11.6	81.1
Number	9	11	7	43	301
Cocaine/Crack					
Percent	0.8	1.4	0.8	2.2	94.9
Number	3	5	3	8	351
Uppers/Speed					
Percent	0.5	0.3	0.5	6.5	92.1
Number	2	1	2	24	340
Downers/Tranquilizers					
Percent	1.6	1.6	0.5	6.2	90
Number	6	6	2	23	334
Heroin					
Percent	0	0	0.3	1.1	98.6
Number	0	0	1	4	365
LSD					
Percent	0	0	0	1.9	98.1
Number	0	0	0	7	363
Other Non-Medicinal Drugs					
Percent	0	0	0	0.8	99.2
Number	0	0	0	3	360
Inhalants					
Percent	0	0	0	0	100
Number	0	0	0	0	440

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The majority of survey participants indicated they have never used alcohol (52.1%; 198); marijuana (81.1%; 301); cocaine/crack (94.9%; 351); uppers/speed (92.1%; 340); downers/tranquilizers (90%; 334); heroin/opiates (98.6%, 365); LSD/hallucinogens (98.1%; 363); inhalants (100%; 440); and any other drug for non-medical use (99.2%; 360) (see Table 30).

Of those respondents who have used alcohol, 23.7% (90) have not done so for three years or more; 12.9% (49) reported use within the past month, 8.2% (31) within the past year and 3.2% (12) within the past three years. The majority (53.6%; 83) of respondents who have used alcohol were between the ages of 18 - 29 when they took their first drink (see Table 31). A little over 36% (57) took their first drink between the ages of 11 - 17 followed by 4.4% (7) between the ages of 30 - 30; 3.2% (5) between the ages of 4 - 10; 1.2% (2) between the ages of 40 - 49; and one between the ages of 50 - 59.

CHART 30: MOST RECENT USE OF SELECTED DRUGS AND ALCOHOL

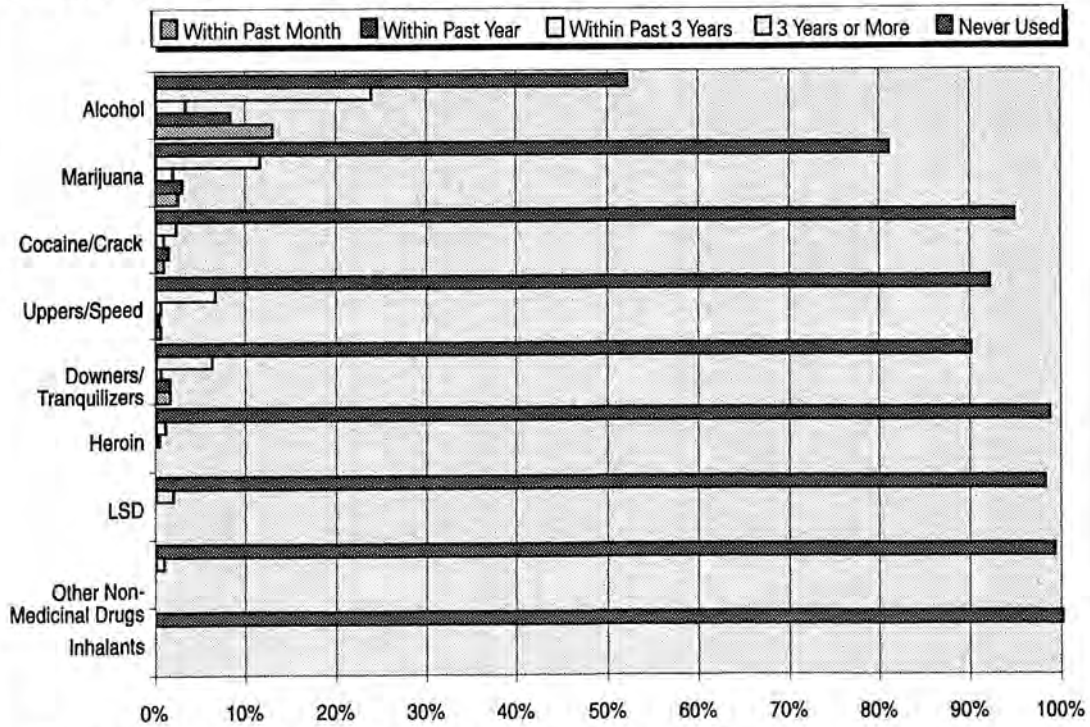

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TABLE 31: REPORTED AGE AT FIRST USE OF SELECTED DRUGS AND ALCOHOL FOR LONG-TERM AFDC RECIPIENTS

	AGES						
Substance	4-10	11-17	18-29	30-39	40-49	50-59	60+
Alcohol							
Percent	3.2	36.7	53.6	4.4	1.2	0.6	0
Number	5	57	83	7	2	1	0
Marijuana							
Percent	4.4	42.7	46.8	4.5	0	1.5	0
Number	3	29	32	3	0	1	0
Cocaine/Crack							
Percent	0	11.1	55.6	27.7	5.6	0	0
Number	0	2	10	5	1	0	0
Uppers/Speed							
Percent	0	38.5	57.7	0	0	3.8	0
Number	0	10	15	0	0	1	0
Downers/Tranquilizers							
Percent	0	32.4	32.4	23.5	8.8	0	2.9
Number	0	11	11	8	3	0	1
Heroin							
Percent	0	25	75	0	0	0	0
Number	0	1	3	0	0	0	0
LSD							
Percent	0	16.7	83.3	0	0	0	0
Number	0	1	5	0	0	0	0
Other Non-Medicinal Drugs							
Percent	0	50	25	0	0	25	0
Number	0	2	1	0	0	1	0
Inhalants							
Percent	0	0	0	0	0	0	0
Number	0	0	0	0	0	0	0

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The average age for initial use was 19.5 years. Approximately 20% (47) drink alcohol an average of once a month followed by 7.9% (18) who drink alcohol several times a month; 3.5% (8) who drink alcohol several times a week; and two (0.9%) respondents who drink alcohol daily. None of the respondents reported getting drunk on alcohol daily (see Table 32).

Approximately 10% (25) reported getting drunk on alcohol about once a month followed by 4.5% (11) getting drunk several times a month and 1.2% (3) getting drunk several times a week. Eleven (2.7%) of the respondents indicated they received treatment for alcohol abuse between 1986 and 1994.

CHART 31: AGE AT FIRST USE OF SELECTED DRUGS AND ALCOHOL

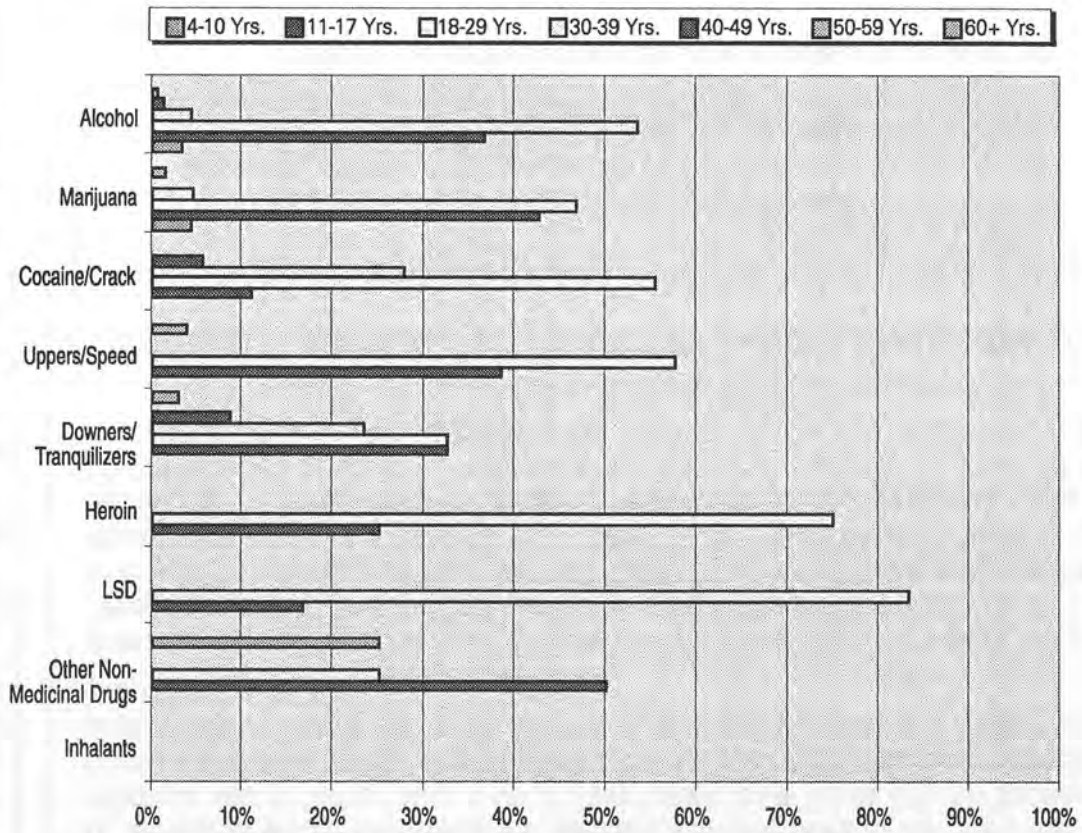

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TABLE 32: FREQUENCY OF SELECTED DRUG AND ALCOHOL USE BY LONG-TERM AFDC RECIPIENTS

Substance	Daily	Weekly	Several Times A Month	Once a Month	Not in the Last Year
Alcohol					
Percent	0.9	3.5	7.9	20.5	67.2
Number	2	8	18	47	154
Marijuana					
Percent	1.6	0.5	4.2	5.2	88.5
Number	3	1	8	10	169
Cocaine/Crack					
Percent	0	0.6	1.2	0.6	97.7
Number	0	1	2	1	169
Uppers/Speed					
Percent	0	1.2	0.6	0.6	97.7
Number	0	2	1	1	169
Downers/Tranquilizers					
Percent	3.4	0	0	1.7	94.9
Number	6	0	0	3	166
Heroin					
Percent	0	0	0	0	100
Number	0	0	0	0	171
LSD					
Percent	0	0	0	0	100
Number	0	0	0	0	171
Other Non-Medicinal Drugs					
Percent	0.6	0	0	0.6	98.8
Number	1	0	0	1	169

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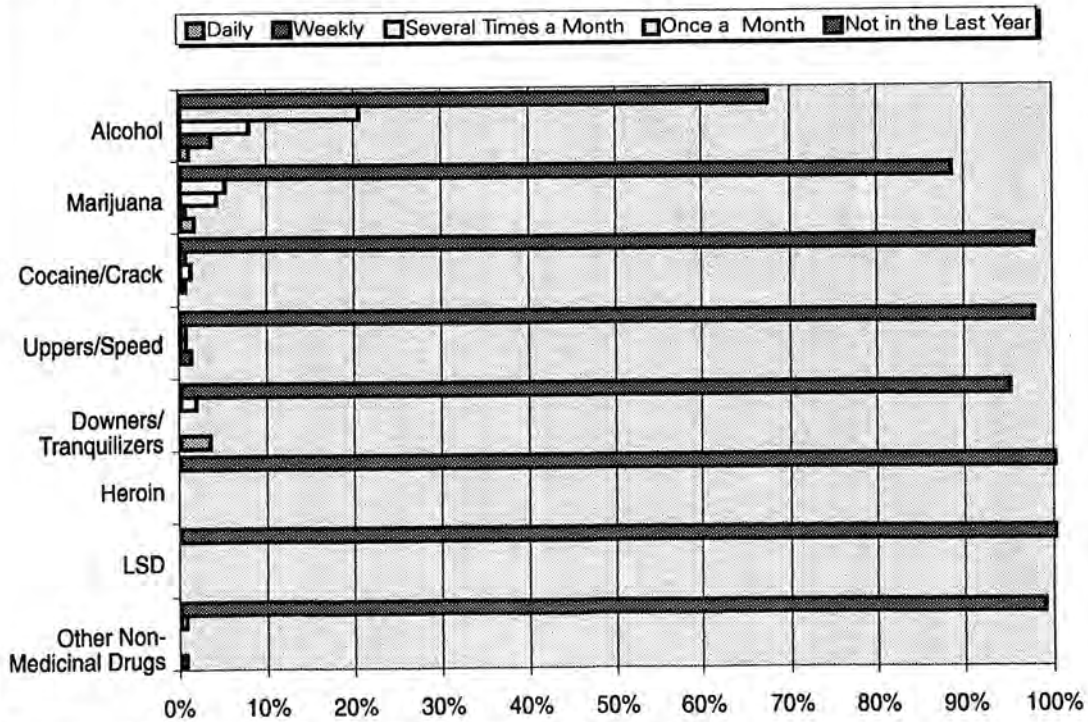
None of the respondents reported use of heroin/opiates, LSD/hallucinogens, or inhalants within the last three years. Only one person reported the non-medical use of 'other' drugs on a daily basis (see Table 32). Of those respondents who have used heroin/opiates, the majority (75.0%; 3) first used the drug between the ages of 18 -22 with one reporting first use at age 14 (25.0%).

A similar age at first use pattern was identified for persons using LSD/hallucinogens with 83.3% (5) first using the drug between the ages of 19 - 29 and one (16.7%) starting at age 14 (see Table 31). None of the respondents reported the use of inhalants. For 'other' drugs used for non-medical purposes, two (50%) respondents reported beginning use between the ages of 13 - 15 followed by one (25%) respondent beginning use at the age of 19 (25.0%) and one (25%) respondent reporting first use at the age of 55 (25.0%).

CHART 32: FREQUENCY OF SELECTED DRUG AND ALCOHOL USE



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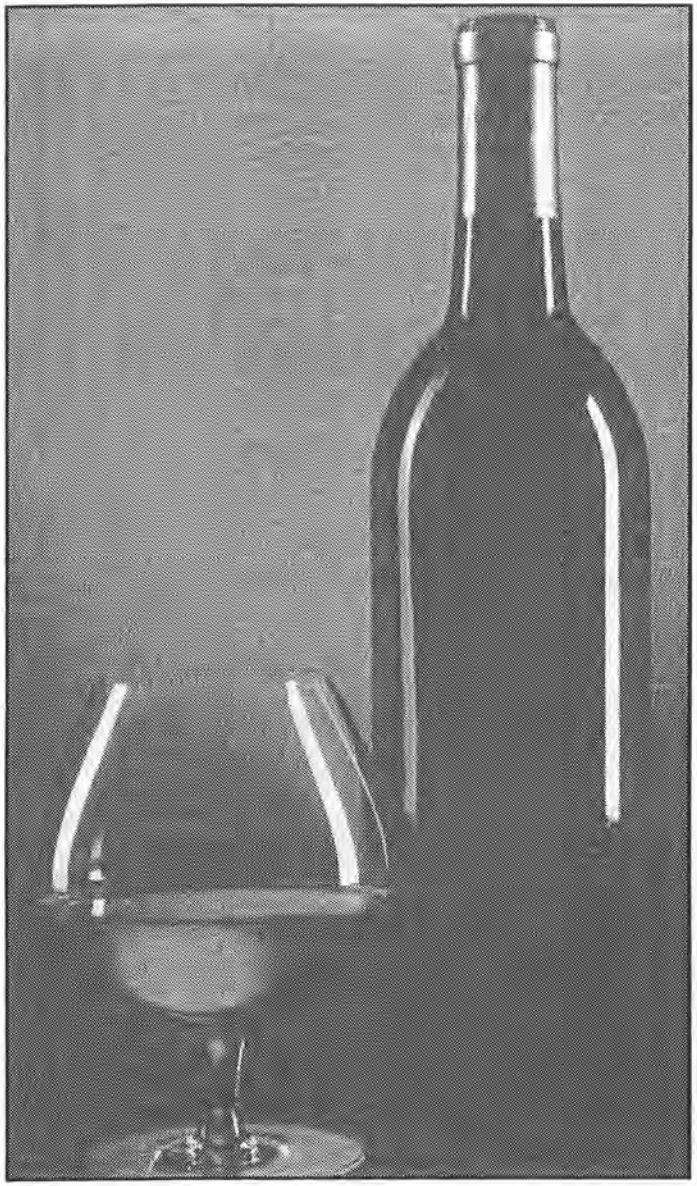

Of those respondents who have used marijuana, 11.6% (43) have not done so for three years or more. Three percent (11) have used marijuana within the past year followed by 2.4% (9) within the past month, and 1.9% (7) within the past three years (see Table 30). The largest proportion of respondents first began using marijuana between the ages of 18-27 (46.8%; 32) followed by 12 -17 years of age (42.7%; 29); 8 -10 years of age (4.4%; 3); 30 - 37 years of age (4.5%, 3); and 54 years of age (1.5%, 1) (see Table 31). Of the current users of the drug, 5.2% (10) reported using an average of once a month followed by 4.2% (8) using several times a month; 1.6% (3) using daily; and one (2.1%) respondent using several times a week (see Table 32).

Of the respondents reporting the use of cocaine/crack, 2.2% (8) have not done so in three or more years (see Table 30). Five (1.4%) of the respondents have used within the past year; three (0.8%) have used within the past three years and three (0.8%) have used within the past month. The majority of respondents who have used cocaine/crack began their use between the ages of 18 - 29 (55.6%; 10) followed by 30 - 39 years of age (27.7%, 5); 11 -17 years of age (11.2%; 2); and 40 - 49 years of age (5.6%, 1) (see Table 31). Of current users, two respondents (1.2%) reported using cocaine/crack several times a month followed by one respondent using several times a week (0.6%) and one using about once a month (0.6%) (see Table 32).

Twenty-nine (7.9%) respondents reported the use of uppers/speed at some time in their lives. Of those, 6.5%(24) have not done so in three or more years (see Table 30). Two (0.5%) of the respondents reported use within the past three years followed by one (0.3%) within the past year, and two (.05%) within the past month. The majority of respondents who have used uppers/speed started between the ages of 18 - 29 (57.7%; 15) followed by 11 - 17 (38.5%; 10) and 50 - 59 years of age (3.8%; 1) (see Table 31). Of current users, two respondents (1.2%) reported using uppers/speed several times a week followed by one (0.6%) using several times a month, and one (.06%) using about once a month (see Table 32).

For current use of downers/tranquilizers, 6.2% (23) respondents indicated they have not used in three or more years. Six respondents (1.6%) reported using downers/tranquilizers within the past month followed by 1.6% (6) reporting use within the past year and two (0.5%) using within the past three years (see Table 30). Of those reporting use of downers/tranquilizers, 32.4% (11) began using the drugs between the ages of 11 -17 followed by 32.4% (11) between the ages of 18-29; 23.5% (8) between 30 - 39; 8.8% (3) between the ages of 40 - 49; and 2.0% (1) at the age of 62 (see Table 31). Of current users, six (3.4%) respondents reported daily use of downers/tranquilizers and three (1.7%) use about once a month (see Table 32).

TABLE 33: REPORTED FREQUENCY OF IMPAIRMENT FOR LONG-TERM AFDC RECIPIENTS

Frequency	Type of Impairment Got Drunk	Got High
Daily		
Percent	0	0.5
Number	0	1
Weekly		
Percent	1.2	3.2
Number	3	6
Monthly		
Percent	4.5	2.7
Number	11	5
Once a Month		
Percent	10.2	4.8
Number	25	9
Not in the Last Year		
Percent	84.1	88.8
Number	206	166

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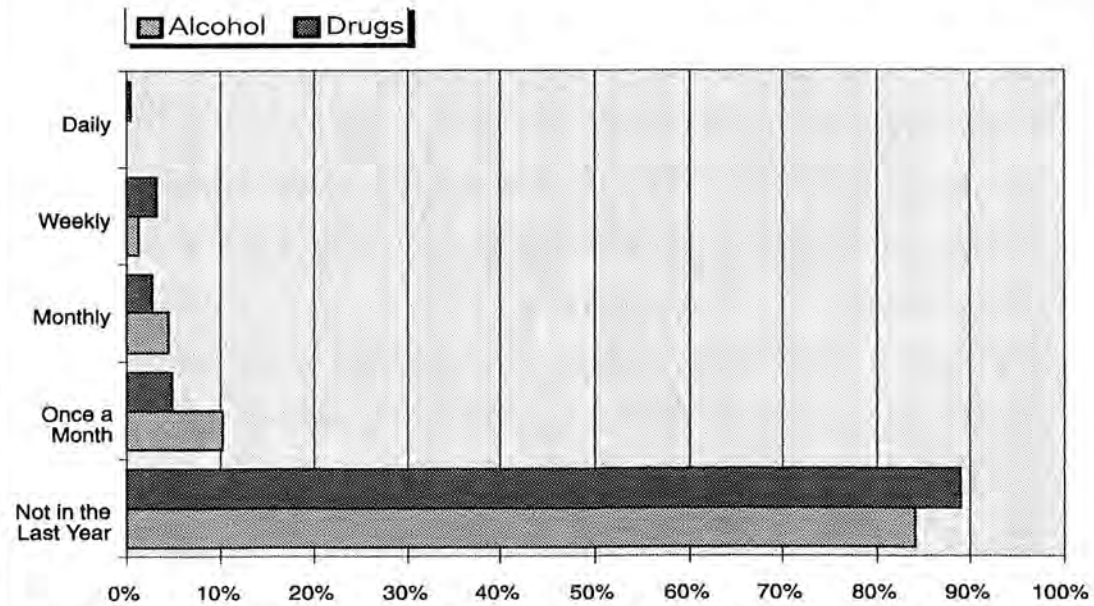
Office of Management Services/Research, Evaluation & Statistics (5/95)

Overall the majority (88.8%; 166) of respondents indicated they have not gotten high on drugs within the last year. Nine (4.8%) respondents indicated they get high on drugs about once a month followed by 3.2% (6) getting high several times a week; 2.7% (5) getting high several times a month; and one (0.5%) getting high daily (see Table 33). Respondents who reported they get high or drunk on a daily, weekly or several times a month basis are at high risk for chemical dependency if not already dependent. From this analysis, it is estimated that approximately 5.2% of the long-term AFDC population is currently at risk for chemical dependency.

The majority (52.9%) of respondents who currently use alcohol and or other drugs indicated that marijuana is their drug of choice followed by alcohol (29.4%). However, alcohol is the drug that is most often used (42.1%) followed by marijuana (36.8%). This is probably due to the cost, legality, and availability of marijuana. Fifteen respondents (3.8%) indicated they have been to treatment for drug abuse. Respondents reported receiving treatment at various times from 1980 through 1994.

CHART 33: FREQUENCY OF DRUG AND ALCOHOL IMPAIRMENT



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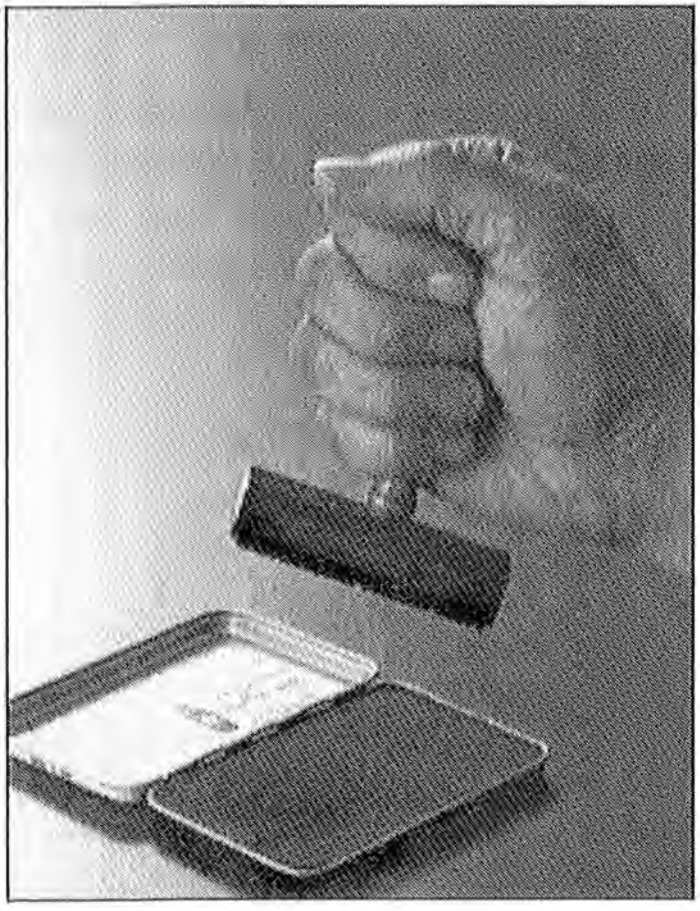
SECTION V: RECIPIENT REFORM



The final question on the survey asked participants, "If you were the director of DHS, what changes would you make in the AFDC program?" A total of 35 different recommendations was made by the respondents including some who felt that no changes were necessary. The top five recommendations are as follows:

- improve job training;
- increase monthly benefits;
- stop fraud;
- continue benefits after recipients obtain a job; and
- improve medical assistance while on AFDC and after obtaining a job.

Client comments were quite extensive and informative. Therefore, a sampling of client statements regarding the top five recommendations cited above is provided below (in literal form):

- Help people get jobs and education.
- Help families that take minimum wage jobs with food stamps and medical assistance.
- No matter what age should get job training and job. Not cut their check immediately after get job.
- Not give aid to foreigners. Give job training and jobs to Americans only.
- Not cut off people because they can't get to school or job interviews.
- Help with school books and clothes.
- Provide jobs to those who are willing to work.
- Provide transportation to jobs and school.
- Help those who want it and cut those off that won't help themselves.
- Start job training program that puts people into specific jobs.
- Weed those people out that can work but refuse to do so.
- Make everyone on AFDC to get out and look for a job.

- Make program that finds people jobs and get them off welfare.
- Put people to work for the government to prepare them for a real job.
- Job training of AFDC participants.
- Change job training program to prepare people to make enough money to stay off welfare.
- Start helping people to find jobs.
- Make sure everyone gets a job.
- More job training.
- Get lazy people off AFDC.
- Help me find a good job and get off welfare.
- Create program to help mother better herself.
- The ones getting pregnant would be cut off; the ones selling food stamps cut off; the ones giving their money and food stamps to men cut off.
- Let people go to school to get their GED and get job training.
- Have more people in job training for a real job not one that gets them off AFDC temporarily.
- Get OJT that pays more than $3.00 per hour. A woman has a child while on AFDC give option tubal or off AFDC.
- More job placement help.
- Help with more medical and medicine.
- Work on health care for adults over 21.
- Changes with medical assistance.
- Medical card should cover everything for a child.
- Changes in dental and medical.
- People on AFDC get proper medical help.
- Pay for adult dental and eye work. We need preventative medicine instead of after the fact.
- Medical card pay for more than 3 prescriptions. We pay over $100.00 per month on medicine.

- Pay for dental, medical, and glasses regardless of age.
- Pay more medical benefits per month.
- Give more punch outs for prescriptions and medicine.
- Fix the mother's teeth.
- Medical card pay the same for over 21 and under 21.
- The bills we get from hospitals and doctors from treating our children should not be because we are unable to pay them.

Other recommendations made by survey respondents include the "development of special county stores"; "mothers be allowed to stay home"; "more help for family"; "more frequent reviews"; "monitor homes for child abuse"; "more research"; "individualized treatment"; "help for the disabled"; "disincentives for having more children"; "more access for women"; "changes in medical assistance"; "improve parent support"; "have a grandparent program"; "give health checks"; "cut off drug and alcohol abusers"; "develop a mentor program"; "monitor DHS personnel"; "child care improvements"; "involve private businesses in job program"; "empathy within the system"; "reduce paper work"; "more home visits"; "empower clients"; "ask for divine guidance"; "require education"; "continue AFDC after receive job"; and "give vouchers for clothes."

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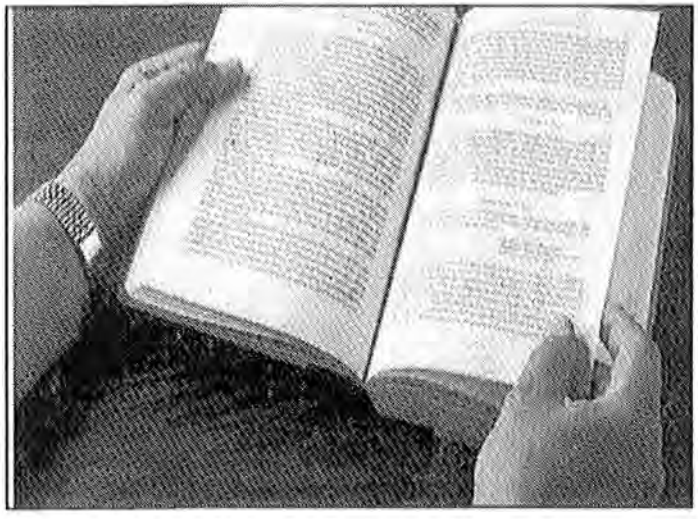

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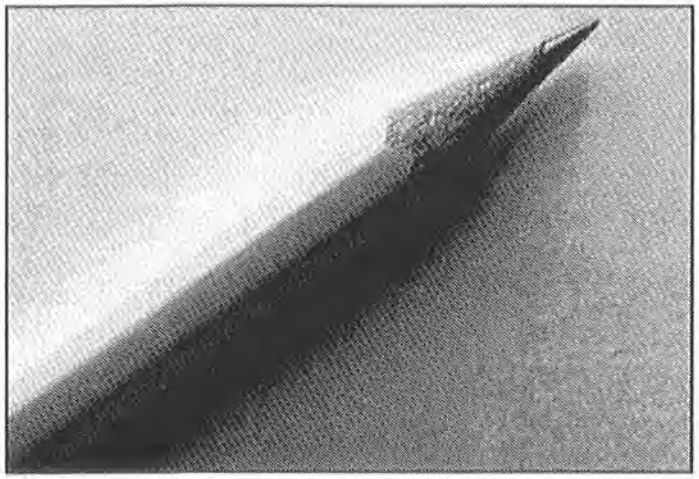
State Justice Institute Conference, 1993

APPENDIX A:

LETTERS FROM SURVEY PARTICIPANTS

NOTE: *Letters are presented as written by the Participant*



LETTER #1

I am _____ _____ I have 5 children on welfare AFDC you wonder why I draw it well my husband _____ _____ beat my kids & me I live with him for 8 years - until one day he threw my 5 year old Boy against my Brick fire place & I hit him with a iron pan and left him. we have not seen him for 9 years now. that was in 1985 when we left him, But anyway the child support center told me that he did not have to pay child support because he gets SSI check or as a crazy check. they say he does not have to pay - well that's not fair. he's in Atkins, Ark. he gets 480.00 monthly he sould have to pay child support. you know it takes two to have babies not one. I was geting 532.00 monthly AFDC. well I am working 2 jobs I make 340.00 monthly that is 1/2 my check. he sould have to pay the rest. then I would not be drawing AFDC. their was a man on a TV show with a women that had 6 children on welfare - well I agree, their is alot of people geting AFDC. I think parents should make their kids mine. you take teenager 12,13 & 16 having babies well they are babies. I have 2 girls 15 &16 years old. But I have rules my girls do not go out until they are 16 year old. if parents would do that then 12 & 13 14 would not be having babies at that age - or if they do then the parents should take care of their kids & babies not AFDC. in Idabel, OKLA. most people here get AFDC most teenagers or SSI crazy checks - well I think that should be stoped because men get women pregnant than they get on SSI. oh well for the women & babies. You know if other men have to pay child support for their children, why can't SSI people pay too. I know people that get's SSI check & AFDC together she had her son sent off because he used drugs - well that's good they told her to Leave him their for 4 mos. in a treatment center she Let him stay their for 2 weeks because they told her they were going to take her AFDC check away until her son came home well she call the treatment center I said she needed her son home because she was going to get her AFDC check cut off. and she couldn't make it with out it. well to me she does not Love her son all she's care for was the money She's get's on him that's not right. people Like that don't need children. I Love all of my children I would not give my children up for anything. and if I get cut off of AFDC well I will just have to make it on 340.00 monthly I can. my kids might not get much things But we made it before. if you got Love, thats enogh for anyone. and also that man said on TV. about different States paying more money on AFDC then other do. that's ture in Texas they pay Less on AFDC because their is alot of

LETTER #1

CONTINUED

good job's their & they could get more working than getting AFDC - of coruse rent cost more to Live their too. but I think every state should pay the same amont. like OKLA. Calf - and others pay alot more money on AFDC I think they should pay the same as Texas & Ark does. then people would not be moving to high paying States to get more money. and Something esle here in Idabel, OKLA. this place is what call drug city. these people or some people here take their kids AFDC checks & SSI checks - and buy drug and children don't get taking care of that's not right that money is for taking care of the children to Buy colthes, school, and everything esle for them not for parnents to buy drug with. I never used drugs or alcohol of anykind. the only drugs I use is what Docter right's me for cold's or ful. and don't like taking them. and also I think people who get SSI check's Should have to be seen by docter every year - some people who is on SSI check don't need them they go in and smoke dope & docter say their crazy and put's them on SSI . my Dad is 62 years old he has been trying to get on SSI because he is disable to work, they won't give it to him he is to old fer any job here. he has heart perblem, But a 21 year Boy went in and got on SSI with ends 90 days, their is nothing worng with him he is young, can read & write & has high school deploma, he can get a good job - he say he would rather get SSI and stay home & use drug. my dad has beeb trying to get SSI for 2 years. the dene him and tell him he can work and do something well if that the case so can some of the young people. I do think the goverment should Look into SSI checks two just like AFDC - checks. I know a girl here that can read & write good the Docter said she was mental, she must not be very crazy she can read better than me. well get back to me I was work full time at nuresing home I went to nurseing school for a CNA nurse & pass the test by the skin of my teeth But got a job - worked for a year or 2 years - and got hurt on job I pulled something Lose in my stmoch, and in my heart my Docter told me to try to get SSI disable the told me know - I have a Letter from my docter that told me not to Lift heavey things or I would have a heart ace - my Blood preasher is high & goes up & down. But they said I was able to work - OK. I am doing Light work 2 jobs I am trying to make it for my children I am making 1/2 of my AFDC check why can't the goverment make my ect husband pay child support then I would not be on AFDC - that is fair they are his kids two. But if the goverment wants my AFDC check - then that OK- because I would not want to trade my kids for all the AFDC checks you could give me - I do Love me children and will support them but you are asking people to tell their Story. well I did - hope this gets to some one maybe they can fine away to do something about child support oh Buy the way, I do have one more Baby she is 4 year old But I don't get AFDC on her, at all. her Daddy helps me take care of her - and that's great - _____ _____ and 6 wondfull children.

LETTER #2

My grandparents raised me. I only went through the 8th grade I never worked out. I got married at 21. My husband supported me & the children. We had 12 children all of whom are living except 1 They all have their familys to raise. My husband got sick when our 6th child was about 1 year old. There were 3 Doctors give him a year to live if he would take care of him self. That was when we got AFDC for the first time. He didnt do anything for 5 years then he went back to work I am 78 and my grand daughter is a Junior in high school and its hard for me to get thing for her some times.

I hope I have answered enough of your questions as I am not very smart.

Thanks

LETTER #3

These questions about working it has been so many years. I do not know the year are dates.

But, I got a divorce about 18 years ago I never remarried again. I had eight children at the time I put all of them through school except for my youngest one who got killed at the age of 16 in Sept 90 he was in the 11th grade.

In 1991 my son which was 32 then got shot five times.

In 1992 my Son which was 33 years then got a $16,000 pound log on him. and he is paralzed from his chest down, he has three boys.

So I've got two children a little boy 12 years old and a little girl 10 year old that I have raised if I hadn't had them when I had all my problems, I don't know what I would have done, they help me make it through the hard times. So, I'm not able to work. Im on high blood pressure medicine arthritis medicine, anti depression medicine Thyroid medicine.

so I'm going to fill out what I can but dates it's been so long. I don't what to put something down and it not be right.

LETTER #4

Oct. 14, 1994

To Whom It May Concern

Thank you for the opportunity to take part in your survey. I hope that the information provided by myself and others, will serve to help make a positive change in public assistance.

I have always felt that the majority of people receiving assistance, are good honest individuals, who if given some support for a period of time, would work hard to get and mantain a job, and be positive role models for their children. It would make them feel like respected, up standing citizens of their community. A transition time frame of perhaps 9-12 months, in which help with such things as day care, housing, and medical were provided, would better enable an individual to cope with the day to day living requirments that must be attended to in a responsible way.

The adjustment would be made easier for the individuals and their family. Perhaps some free couseling on how to make these adjustments would also be beneficial. Also a follow up review at some point during this transition would be a help.

Please feel free to contact me, if you think I may be of some more help.

Thank you for your concern in this matter

Yours truly,

_____ _____

_____

Tulsa, OK. 74136-____

___-___-____

LETTER #5

If I Was The Director of DHS.

This person job is obivously a hard one & very tiring. And I truly would not wont his job but I'd like to have a say about some things.

When dealing with this subject one has to know how the other may feel.

Its time to start a program to get money owed to children from fathers or mothers, This needs to be dealt with very strongly.

There needs to be transportation set up for mothers on AFDC to get to an education center to obtain thier G.E.D. So they won't have an excuse for not going to better help them and thier family.

More job training

Once one has completed thier training, and has gotten thier G.E.D. and find a good job give them time to truly get on thier feet and remove them from the program without taking it away from them immediately so there won't be any hardship.

Now I'd like to tell you a little about myself. I'm a 37 year old black female who desire's very much so to get off AFDC and become a productive member of society. I believe in myself. I'm beautiful in my own way. But I have one flaw, my facial apperance. There have been jobs that I know that I can do very well, but when dealing with the public one must look thier best and so I don't have any teeth and I truly love to smile and talk with people, but I know they find it ugly cause I do and my children do as well.

I don't volunteer at my children school or won't to deal with people anymore like I use to and I won't so much to be the person I once was and know I still am. And you know when I take my children to an office visit I get sad inside when I see another woman paying by check and I long so bad to want to be that woman. And then I feel bad because they are paying for my children and I'm taking from them and many of my relatives that work. I pray all the time that I may better myself, so that I can began to own my own house, first car. When I'm working I'am very happy and my children are happy I won't that feeling again.

And I pray that you and no-one else will ever feel the way I do and you couldn't possibly know how I feel right now and hope you never do. Thank-you for listening Mrs. _____

LETTER #6

If I Were The Director Of DHS:

to lengthen the time of totally cutting assistance after finding a job, once you have stayed on the job for at least 3 months begin to deduct. And at least 14 days to report changes. Try to get workers to be more caring & understanding, read their cases from Beginning to end. (workers) Learn to read between the lines, and they can pin-point the ones that need counseling are just that extra concern heart from a stranger that may lift your heart to better things. Talk to their clients caring on a one on one basic, with the understanding that certain conversations, will not affect their case, but is willing to lend and ear are a shoulder if needed. Could help out on some the counseling, not to put any one out of work but counseling don't work for everyone. If not an ear or shoulder at least advice clients of the HELPLINE 24 hrs. 7 days A WK. They will be amazed of the coporation of their clients and the less stress from their jobs. There's not many things to change with program, the rest of the program, works pretty good. It's just the job thing and some of the workers need training in dealing with the public, cause everybody is their on indivdual, some are, lost, confused, giving up, caring, understanding, stroke of Bad Luck, Evil, Nice, Slowly educated, Fastly Educated, etc... We give are children, other peoples children a kiss and hug to make it all better, why can't adults give each other a smile and a ear or shoulder at times. So I say start with yourself (Director). this is not meant to be sarcastic only helpful.

LETTER #7

If I Were The Director Of DHS I Would:

Take people off AFDC who are able to work ecspeciall the young ones who get pregant just to get on AFDC. and those who are on AFDC try and give them a raise like alest $20.00 raise. it sure could help & those who are on AFDC help them get a job that pays more then $4.25 hr give them a chance to make it off AFDC. let them stay on AFDC for about three months then they could know if the job is going to last. or help them get there own Bussiness get started. or if they need special training keep them on AFDC for a point of 2 yrs if they do not have there education or training. then help them get a regular job of medium wage. any way you know what I mean.

LETTER #8

If I Were The Director Of DHS I Would:

make people more aware of fraud - provide better health care for adults - provide more motivation for employment

I have always been very thankful for DHS help & support for my children. We came out of an extremely abusive (physically, emotionally, sexually) marriage. My husband was an alcoholic & drug user & was extremely abusive. I was so beaten down emotionally I couldn't function if he didn't tell me what to do. If I'd had someplace to go & someone to care, perhaps we could have escaped sooner.

I think that welfare reform needs to start long before people reach the desperate end of their road. It needs to start with educating people about marriage & relationships & asking for help with those things. And teaching children that self-worth & self-respect are attainable goals. And being a productive part of society is what it is all about. Don't be ashamed to ask for help "early in the game", to prevent long term damage.

When people come to DHS for help - it's because they are already beaten down & destroyed. They need compassion & understanding & kindness. Not rudeness & a "better than thee" attitude. I know there are "users" who abuse the system & they make it hard for the ones of us who really try. Perhaps a reward system would help, I don't know. I do know that my children & myself would not have survived without DHS help. God bless you all!

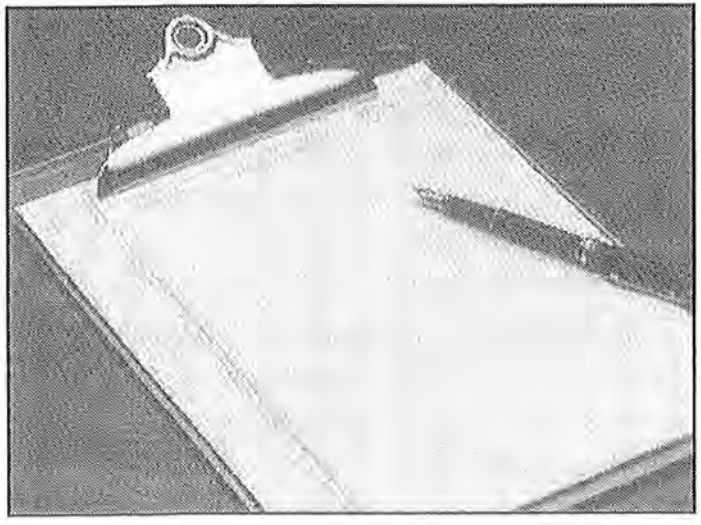
LETTER #9

If I Were The Director Of DHS I Would:

Let the reciever get a job and receive day care and AFDC for a few mo till they can get on there feet and than give them day care, food stamps and medical, so they can give their children a comfortable life with out being ashamed of who they are because with this help it take all they can do just to stay alive and nothing left to make them feel like they are a regural person today. When all my kids were still home I was getting food stamps and my old car went out I couldn't buy a used car because I had no money from pay-day to payday I could get a loan on a new car without any down. A used car they want adown. People like myself work but just get by so I got a new S10 pickup DHS said because I got that truck I couldn't get help. but without a way to work I would have to have more than food stamps to live. Now all of the boys are grown But I am a reciever for someone else's child. We get a sm ck and day care and medical. It helps us get by and she can feel like other kids at her school. I feel that all kids should be able to hold their heads up.

The way things are people are not able to get a good start on a job before their afdc is cut off and they go under and back on afdc.

APPENDIX B: SURVEY INSTRUMENT



Date: _____

The Department of Human Services is conducting a study to determine how to improve the AFDC program. In order to do this, we request your participation in the following survey. Since you use the program, your input is very valuable. This is your chance to influence a program which affects you. The information you give is completely confidential. It will not be released to anyone. Rather it will only be used for research. Your honesty is appreciated and the accuracy of the research is dependent upon it. Please do not write your name anywhere on this survey. Thank you for your input.

1) If I found a job and my AFDC case was closed, I would still need to receive day care assistance for the following period of time:
(CHECK ONLY ONE)

☐ 0 months ☐ 1-3 months ☐ 4-8 months
☐ 9-12 months ☐ 13-18 months ☐ More than 18 months

2) If I found a job and my case was closed, I would still need an AFDC medical card for the following period of time:
(CHECK ONLY ONE)

☐ 0 months ☐ 1-3 months ☐ 4-8 months
☐ 9-12 months ☐ 13-18 months ☐ More than 18 months

3) I would be more likely to get a job if my AFDC benefits were not affected by my earnings for the following period of time:
(CHECK ONLY ONE)

☐ 0 months ☐ 1-3 months ☐ 4-8 months
☐ 9-12 months ☐ 13-18 months ☐ More than 18 months

4) Have you ever had a job?

☐ YES ☐ NO *(IF NO GO TO QUESTION 12)*

5) What types of jobs have you had in the past?
(CHECK ALL THAT APPLY)

☐ Clerical/secretarial ☐ Service (restaurant, gas station...)
☐ Professional ☐ Trades (electrician, carpentry, seamstress..)
☐ Sales ☐ Managerial
☐ Laborer (landscaper...) ☐ Other (specify)_____

APPENDIX B: SURVEY INSTRUMENT

CONTINUED

6) What is the longest period of time that you have ever worked?

_____

7) When did you last have a job?

DATE: _____

8) What type of employment was your last job?
(CHECK ONLY ONE)

☐ Clerical/secretarial ☐ Service (restaurant, gas station...)
☐ Professional ☐ Trades (electrician, carpentry, seamstress. .)
☐ Sales ☐ Managerial
☐ Laborer ☐ Other (specify)

9) On your last job, about how many hours per week did you work?_____

10) On your last job, what was your hourly pay?_____

11) When did you leave your last job?_____Why _____

12) Are you looking for work at the present time?

☐ NO ☐ YES *(IF YES, GO TO QUESTION 14)*

13) The following are a list of problems that keep people from looking for work. Please indicate which of these are problems for you.

	ALWAYS A PROBLEM	SOMETIMES A PROBLEM	RARELY A PROBLEM	NOT A PROBLEM
Work qualified for not available	1	2	3	4
Can't find any work	1	2	3	4
Lack of education or training	1	2	3	4
Lack of experience	1	2	3	4
No transportation	1	2	3	4
Too young/old	1	2	3	4
Permanent Disability	1	2	3	4
Care for a disabled family member	1	2	3	4
Child care problems	1	2	3	4
Pregnant and can't work	1	2	3	4
In school or other training	1	2	3	4
Illness	1	2	3	4

APPENDIX B: SURVEY INSTRUMENT

CONTINUED

	ALWAYS A PROBLEM	SOMETIMES A PROBLEM	RARELY A PROBLEM	NOT A PROBLEM
Choose to stay home with child(ren)	1	2	3	4
Child(ren) keep getting into trouble with school/police	1	2	3	4
If you get a job you will lose your medical assistance card	1	2	3	4
If you get a job you will lose your public assistance check	1	2	3	4
If you get a job you will lose your public housing	1	2	3	4
Other Specify_____	1	2	3	4

14) What type of employment would you be most interested in?_____

_____

_____

15) At what age did you have your first child? _____

16) How many children currently live in your household? _____
Of these, how many are. . .
Your own children _____ Someone else's children _____

17) How many of the children that are currently living in your household are you receiving AFDC/SSI for? _____
Of these, how many are. . . .
Your own children _____ Someone else's children _____

18) How many of the children that are currently living in your household are you not receiving AFDC/SSI for? _____
Of these, how many are. . . .
Your own children _____ Someone else's children _____

19) List the ages of your children

_____

20) How many of your children were born while you were on AFDC ? _____

21) Do you expect any of your children to be on AFDC when they grow up?
☐ More than likely ☐ Not likely
☐ Possibly ☐ Definitely not

APPENDIX B: SURVEY INSTRUMENT

CONTINUED

22) Do you have any children who have ever received an AFDC check in their own name?

☐ YES ☐ NO

23) Do you have any children who now receive an AFDC check in their own name?

☐ YES ☐ NO

24) What do you think would be MOST useful in helping you get off AFDC? (RANK THE ANSWERS IN THEIR ORDER OF IMPORTANCE, WITH 1 BEING THE MOST IMPORTANT REASON AND 11 BEING THE LEAST IMPORTANT REASON)

___ A. Job training
___ B. Help in getting child support
___ C. Help finding a job
___ D. More affordable housing
___ E. Marriage or someone to support you
___ F. Day care
___ G. Health insurance
___ H. Better transportation
___ I. More education
___ J. Help from family and friends
___ K. Nothing
___ L. Other: Specify _____

25) Which of the following services have been provided to you and your family through DHS? (CHECK ALL THAT APPLY)

☐ Medical treatment
☐ Preventive medical services (e.g. routine exams, immunizations, lab test, etc.)
☐ Help in coping with social/developmental problem associated with development disorders
☐ Alcohol and drug treatment/counseling
☐ Alcohol and drug prevention services
☐ Obtain adequate housing
☐ Maintain/retain adequate housing
☐ Employment training
☐ Job search services
☐ Day care services for children
☐ Adult day care
☐ Obtaining financial aid and other benefits from agencies other than DHS
☐ Adult basic education (e.g. obtaining GED)
☐ Formal education
☐ Special education

APPENDIX B: SURVEY INSTRUMENT

CONTINUED

- ☐ Pregnancy related services
- ☐ Orientation to work
- ☐ Budgeting
- ☐ Legal assistance (other than child support)
- ☐ Obtaining child support
- ☐ Obtaining psychiatric services
- ☐ Individual and/or group counseling
- ☐ Transportation
- ☐ Parenting classes/training
- ☐ Social skills training
- ☐ Stress management classes/training
- ☐ Family planning
- ☐ Nutrition
- ☐ Child discipline classes/training
- ☐ Marital counseling
- ☐ Conflict resolution classes/training

26) How much help with the needs of your family would you say that you have received from each of the following sources during the last year?

	NO HELP	LITTLE HELP	SOME HELP	A LOT OF HELP
Parents	1	2	3	4
Children	1	2	3	4
Spouse/Partner	1	2	3	4
Other Relatives	1	2	3	4
Friends	1	2	3	4
Neighbors	1	2	3	4
Co-Workers	1	2	3	4
Churches	1	2	3	4
Professionals	1	2	3	4
Government Programs	1	2	3	4
Others	1	2	3	4

27) In 5 years I can see myself ... (CHOOSE ALL THAT APPLY):

- ☐ Still on AFDC
- ☐ Having found a job
- ☐ Having a better job
- ☐ Moving to a better residence
- ☐ Improving family relationships
- ☐ Attending school or a training program
- ☐ Married or with someone to support me
- ☐ Owning a car
- ☐ Getting out of an abusive relationship with my partner
- ☐ Getting out of a bad relationship with my partner
- ☐ Getting help with a drug or alcohol problem

APPENDIX B: SURVEY INSTRUMENT

CONTINUED

28) Following is a list of common reasons why people go on AFDC. Please indicate how true each of the following reasons was for your going on AFDC for the first time:

	Very True	Somewhat True	Somewhat Untrue	Not True At All
A. Couldn't find a job	1	2	3	4
B. Separated/divorced	1	2	3	4
C. Lost your job	1	2	3	4
D. Pregnant or had a newborn child	1	2	3	4
E. Couldn't afford childcare	1	2	3	4
F. Personal problems	1	2	3	4
G. Low wages	1	2	3	4
H. Illness	1	2	3	4
I. Permanent Disability	1	2	3	4
J. Sick or disabled family member	1	2	3	4
K. Problems with child support	1	2	3	4
L. Alcohol/Drug abuse	1	2	3	4
M. Other (specify) _____	1	2	3	4

29) What things have happened in your life that have caused you to remain on public assistance?

_____

_____

_____

30) Did your family receive AFDC when you were a child?
☐YES ☐NO

31) How old were you when you got your first AFDC check in your name? _____

32) How many times have you been on AFDC?
☐This is the one and only time ☐3 to 5 times
☐2 Times ☐6 or more times

33) Are you presently (CHECK ONLY ONE)

☐Single, never married ☐Member of an unmarried couple
☐Separated ☐Widowed
☐Married, living with spouse ☐Divorced
☐Married, not living with spouse

APPENDIX B: SURVEY INSTRUMENT

CONTINUED

34) If you are married, but currently not living with your spouse, how much do each of the following reasons explain why?

	Much	Some	Little	None
A. Cannot afford a divorce	1	2	3	4
B. Trying to work it out	1	2	3	4
C. Separated to get welfare	1	2	3	4
D. For the children	1	2	3	4
E. Religious beliefs	1	2	3	4
F. Prison/mental institution	1	2	3	4
G. Unsure of spouse's whereabouts	1	2	3	4
H. Other: Specify_____	1	2	3	4

35) What is the highest level of education that you have completed? (CHECK ALL THAT APPLY)

☐ 0-6 years

☐ 7-9 years

☐ 10 years

☐ 11 years

☐ 12 years (12 = completed high school)

☐ 13-16 years (16 = completed bachelor's degree)

☐ 17-18 (18 = completed master's degree)

☐ 19-20 (20 = completed Ph.D, law degree, medical degree)

☐ 21 (21 = completed GED)

☐ 22 (22 = post high school training such as business school, trade school, etc., but not college)

The following questions deal with feelings people experience. Please put the number of the correct response on the line next to the corresponding statement.

36) 1. Strongly agree 2. Agree 3. Disagree 4. Strongly disagree

_____ A. I feel that I'm a person of worth, at least on an equal basis with others.
_____ B. I feel that I have a number of good qualities.
_____ C. All in all, I am inclined to feel that I am a failure.
_____ D. I am able to do things as well as most others.
_____ E. I feel I do not have much to be proud of.
_____ F. I take a positive attitude towards myself.
_____ G. On the whole, I am satisfied with myself.
_____ H. I wish I could have more respect for myself.

APPENDIX B: SURVEY INSTRUMENT

CONTINUED

1. Strongly agree 2. Agree 3. Disagree 4. Strongly disagree

_____ I. I certainly feel useless at times.
_____ J. At times I think I am no good at all.
_____ K. My future seems dark to me.
_____ L. I just don't get the breaks, and there's no reason to believe I will in the future.
_____ M. Things just don't work out the way I want them to.
_____ N. I look forward to the future with hope and enthusiasm.
_____ O. In the future I expect to succeed in what concerns me most.

37) When you were growing up, and you did something that your parents did not like, how often did your parent(s)...

	NEVER	SOMETIMES	FREQUENTLY	ALWAYS
Have you do chores	1	2	3	4
Took away your privileges	1	2	3	4
Yell or scream at you	1	2	3	4
Throw something at you	1	2	3	4
Push, grab or shove you	1	2	3	4
Slap you	1	2	3	4
Spank you	1	2	3	4
Kick, bit or hit you with a fist	1	2	3	4
Hit or try to hit you with something	1	2	3	4
Beat you up	1	2	3	4
Threaten you with a knife or gun	1	2	3	4
Use a knife or gun	1	2	3	4

38) When you were growing up, were you ever sexually abused (by this we mean: unwanted touching, sexual assault, or rape) by a family member or others?

☐YES ☐NO

39) If yes, about how old were you when this first happened? _____

40) Were you ever removed from your parent's or guardians home by Child Welfare, police, sheriff, or by order of the court?

☐YES ☐NO

41) Have you ever thought that you had a problem such as depression, schizophrenia, neurosis, manic depressive disorder, etc.?

☐YES ☐NO

APPENDIX B: SURVEY INSTRUMENT

CONTINUED

42) Have you ever had professional help for your problems, such as counseling or therapy?

☐YES If so, when?_____
☐NO (IF NO, GO TO QUESTION 44)

43) What specific diagnosis(es) has been made such as depression, schizophrenia, neurosis, manic depressive disorder, etc.?

Diagnosis_____

Date _____ Medication Taken_____

Diagnosis_____

Date _____ Medication Taken_____

Diagnosis_____

Date _____ Medication Taken_____

44) Have you ever been committed to a mental institution?

☐YES If so, when?_____
☐NO

45) Have you ever attempted suicide?

☐YES If so, when?_____
☐NO

Many people occasionally use alcohol and other drugs to feel better. Here are a few questions about your own use of these substances.

46) When was the most recent time that you used each of the following? Circle the appropriate category and indicate how old you were when you first used each substance.

	Within past month	Within past year	Within past 3 years	3 years or more	Never used	AGE first used
A. Alcohol	1	2	3	4	5	____
B. Marijuana	1	2	3	4	5	____
C. Cocaine/Crack	1	2	3	4	5	____
D. Uppers/Speed	1	2	3	4	5	____
E. Downers/Tranquilizers	1	2	3	4	5	____
F. Heroin/opiates	1	2	3	4	5	____
G. LSD/Hallucinogens	1	2	3	4	5	____
H. Any other drugs for non-medical use: (specify)	1	2	3	4	5	____
_____ (Drug Name)	1	2	3	4	5	____
_____ (Drug Name)	1	2	3	4	5	____

APPENDIX B: SURVEY INSTRUMENT

CONTINUED

47) On the average, how often during the past 12 months have you ever used [SUBSTANCE]:

	Daily	Several times a week	Several times a month	About once a month	Not in the last year
A. Alcohol	1	2	3	4	5
B. Marijuana	1	2	3	4	5
C. Cocaine/Crack	1	2	3	4	5
D. Speed	1	2	3	4	5
E. Tranquilizers	1	2	3	4	5
F. Heroin	1	2	3	4	5
G. LSD	1	2	3	4	5
H. Other	1	2	3	4	5

48) How many times in the past 12 months have you gotten drunk on alcohol? [CHECK ONLY ONE]

☐ Daily ☐ Several times a month
☐ Several times a week ☐ About once a month ☐ Not in the last year

49) Have you ever received treatment for alcohol abuse?

☐ YES If so, when?_____
☐ NO

50) How many times in the past 12 months have you gotten high on drugs? (CHECK ONLY ONE)

☐ Daily ☐ Several times a month
☐ Several times a week ☐ About once a month ☐ Not in the last year

51) What is your drug of choice?

_____

52) What is the drug that you take most often?

_____

53) Have you ever received treatment for drug abuse?

☐ YES If so, when?_____
☐ NO

54) If you were the director of DHS, what changes would you make in the AFDC program?

_____

_____

_____

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